

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000000148

FILED  
Jul 19, 2004  
Secretary of State

Entity Name: AOL LATIN AMERICA MANAGEMENT LLC

## Current Principal Place of Business:

6600 N ANDREWS AVENUE  
#400  
FORT LAUDERDALE, FL 33309

## New Principal Place of Business:

## Current Mailing Address:

6600 N ANDREWS AVENUE  
#400  
FORT LAUDERDALE, FL 33309

## New Mailing Address:

FEI Number: 98-0198401      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: KELLY, J MICHAEL  
Address: 22000 AOL WAY  
City-St-Zip: DULLES, VA 201669323

Title: MGR (X) Delete  
Name: SOKOL, GERALD JR  
Address: 22000 AOL WAY  
City-St-Zip: DULLES, VA 201669323

Title: MGR (X) Delete  
Name: BANDEL, STEVEN I  
Address: 550 BILTMORE WAY, STE 900  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR (X) Delete  
Name: PIERETTI, CRISTINA B  
Address: 550 BILTMORE WAY, STE 900  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR ( ) Delete  
Name: BANOS, OSVALDO  
Address: 6600 N ANDREWS AVENUE, STE 400  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGR ( ) Delete  
Name: MILTON, BRICE P  
Address: 6600 N ANDREWS AVENUE, STE 400  
City-St-Zip: FORT LAUDERDALE, FL 33309

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: HERINGTON, CHARLES M  
Address: 6600 N. ANDREWS AVE., SUITE 400  
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MILTON P. BRICE

MGR

07/19/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date