2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07235

FILED Apr 08, 2009 Secretary of State

Entity Name: EDITORIAL CUBANA LUIS J. BOTIFOLL, INC.

Current Principal Place of Business: New Principal Place of Business: 500 SW 127 AVE. 1900 SW 3RD AVE MIAMI, FL 33184 MIAMI, FL 33129 **Current Mailing Address: New Mailing Address:** 1900 SW 3RD AVE 500 SW 127 AVE MIAMI, FL 33184 MIAMI, FL 33129 FEI Number: 59-2603589 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RASCO, JOSE IGNACIO POWELL-COSIO, SOFIA 500 SW 127 AVE. 1900 SW 3RD AVE MIAMI, FL 33184 US MIAMI, FL 33129 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: SOFIA POWELL COSIO 04/08/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DV () Delete () Change () Addition RAMOS, MARCOS A Name: Name: 2765 SW 32 CT Address: Address: City-St-Zip: MIAMI, FL 33133 City-St-Zip: Title: Title: (X) Change () Addition () Delete RASCO, JOSE IGNACIO Name: COBELO, ARMANDO Name: Address: 500 S.W. 127 AVENUE Address: 1400 SW 84 CT City-St-Zip: MIAMI, FL 33184 City-St-Zip: MIAMI, FL 33144 Title: () Delete Title: (X) Change () Addition JORGE, GUILLERMO POWELL COSIO, SOFIA Name: Name: 500 S.W. 127 AVENUE Address: Address: 1900 SW 3RD AVE City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33129 () Delete Title: Title: (X) Change () Addition MARCELINO, GARCIA S.J. Name: Name: BOTIFOLL, MURAI, LUISA Address: 500 S.W. 127TH AVE. Address: 2100 PONCE DE LEON BLVD. City-St-Zip: MIAMI, FL City-St-Zip: CORAL GABLES, FL 33134 Title: DVT (X) Delete Title: () Change () Addition GARRIDO, JOSE A JR Name: Name: 4725 SANTA MARIA ST Address: Address: City-St-Zip: MIAMI, FL 33146 City-St-Zip: Title: () Delete Title: () Change () Addition ABELLA, ANTONIO Name: Name: Address: 500 S.W. 127TH AVE. Address: MIAMI, FL City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SOFIA POWELL COSIO DS 04/08/2009