


FILE NOW: FILING FEE IS \$61.25

FILED

Feb 12 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000000733 (3)

1. Corporation Name
FESTIVAL DE CINE HISPANO INC.

Principal Place of Business 10700 S.W. 88TH COURT MIAMI FL 33176	Mailing Address 10700 S.W. 88TH COURT MIAMI FL 33176-3710
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 02/12/1996	3a. Date of Last Report
4. FEI Number		5. Certificate of Status Desired		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent ANGULO, JAIME 10700 S.W. 88TH COURT MIAMI FL 33176		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 Zip Code		FL	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANGULO, JAIME	1.2 NAME	
STREET ADDRESS	% 10700 S.W. 88TH COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33176	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAGAN, JOSE	2.2 NAME	
STREET ADDRESS	% 10700 S.W. 88TH COURT	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33176	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	IBANEZ, LIDON	3.2 NAME	
STREET ADDRESS	3191 CORAL WAY SUITE 624	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33145	3.4 CITY-ST-ZIP	
TITLE	STV	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANGULO, SUSAN	4.2 NAME	
STREET ADDRESS	3191 CORAL WAY SUITE 624	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33145	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE _____ 2-1-97

CR2E037 (9/96)