2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# P00000029289

Entity Name: OLE TV. COM.NET, INC.

Current Principal Place of Business:

1800 S.W. 27TH AVENUE
SUITE 501
MIAMI, FL 33145

New Principal Place of Business:

1800 S.W. 27TH AVENUE
SUITE 300
MIAMI, FL 33145

Current Mailing Address:

1800 S.W. 27TH AVENUE
SUITE 501
MIAMI, FL 33145

New Mailing Address:

1800 S.W. 27TH AVENUE
SUITE 300
MIAMI, FL 33145

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RAMOS, JUAN L
3438 LA PLAYA BLVD.
COCONUT GROVE, FL 33133 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: NORNIELLA-HERNANDEZ, ISABEL L
Address: 136 S.W. 8TH ST.
City-St-Zip: MIAMI, FL 33130

Title: S/D ( ) Delete
Name: ROSES, JOSPEH
Address: 1800 SW 27TH #501
City-St-Zip: MIAMI, FL 33145

Title: TD ( ) Delete
Name: MESTRE, JULIO A
Address: 136 SW 8TH ST.
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: NORNIELLA-HERNANDEZ, ISA. L
Address: 136 S.W. 8TH ST.
City-St-Zip: MIAMI, FL 33130

Title: S/D (X) Change ( ) Addition
Name: ROSES, JOSPEH
Address: 1800 SW 27TH 300
City-St-Zip: MIAMI, FL 33145

Title: ( ) Change ( ) Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ISA. NORNIELLA-HERNANDEZ P/D 04/27/2007

Electronic Signature of Signing Officer or Director — Date