

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000029289

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

FILED  
Apr 29, 2008  
Secretary of State

## Current Principal Place of Business:

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

## New Principal Place of Business:

## Current Mailing Address:

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

## New Mailing Address:

FEI Number: 65-0992861      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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, ISA. L  
Address: 136 S.W. 8TH ST.  
City-St-Zip: MIAMI, FL 33130

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

Title: TD (X) 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, ISABEL L  
Address: 185 SE 14 TERRACE APT 1105  
City-St-Zip: MIAMI, FL 33131

Title: SD (X) Change ( ) Addition  
Name: ROSES, JOSEPH  
Address: 1800 SW 27TH AVENUE SUITE 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: ISABEL NORNIELLA-HERNANDEZ

PD

04/29/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date