

FROM : JANUCA S. A.

PHONE NO. : 595 21 51E

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91408 026 ***150.00

APR-30-2003 16:15

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000039819

1. Entity Name
 LATIN MARKETING GROUP CORPORATION



20041125

Principal Place of Business
 3440 HOLLYWOOD BLVD
 SUITE 360
 HOLLYWOOD FL 33021

Mailing Address
 3440 HOLLYWOOD BLVD
 SUITE 360
 HOLLYWOOD FL 33021



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number 65-1006284

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROTH, LEONARDO A ESQ.
 3440 HOLLYWOOD BLVD
 SUITE 360
 HOLLYWOOD FL 33021

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and date of application.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FCC ID: C150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Delete
PTS	SALAMA, JORGE	3440 HOLLYWOOD BLVD SUITE 360	HOLLYWOOD FL 33021	☐
VPD	SALAMA, JORGE	3440 HOLLYWOOD BLVD	HOLLYWOOD FL 33021	☐
				☐
				☐
				☐
				☐

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change	☐ Addition
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JORGE SALAMA, P

4-30-03

9543224280

Date

Daytime Phone