2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 25, 2008 8:00 am Secretary of State

DOCUMENT # P0000081346 1. Entity Name SUPER RADIO OF FLORIDA, INC.				02-25-2008 90046 049 ***150.00				
Principal Place of Business 2601:S0 BAYSHORE DRIVE-STE::1400 -MIAMI, FL 33133	Mailing Address	VE-STEL1400;						
Principal Place of Business - No. P.O. Box # 3. Mailing Address 23 40 So. A. I. V. I.E. H. I.G. HWAY January								
Suite, Apt. #, etc.				08 Chg-P	CR2E0	34 (12/06)		
City & State MIAMI, FLORINA	8 State AM FLORIDA City & State			4. FEI Number Applied For 65-1053339 Not Applicable				
Zip Country 93/33 1), s.A	Country Zip Coun			cate of Status De		\$8.75 Add	ditional	
6. Name and Address of Current Ro	egistered Agent		7. Name	and Address of	New Registered /			
DURAN, ALFREDO G 2601 SO BAYSHORE DRIVE STE 1400			Name ALFREDO G. DURAN Street Address (P.O. Box Number is Not Acceptable)					
MIAMI, FL 33133			2340 So. DIXIE HIGHWAY					
			1 Am 1 FL 3373				le 2 3	
8. The above named entity submits this statement for t	he purpose of changing its re			both, in the Stat	e of Florida. I am	familiar with,	and accept	
the obligations of registered agent.								
Signature, typed or printed name of registered agent and	title if applicable. (NOTE: F	Registered Agent signati	ure required when reinstating	1)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			\$5.00 May Be Added to Fees	3				
10. OFFICERS AND D	RECTORS	11.		NS/CHANGES T	O OFFICERS AND	DIRECTOR	\$ IN 11	
TITLE DIPRESIDENT	Delete	TITLE	DIP SAME			☐ Change	Addition	
IAME PAVA, ALVARO NAM TREET ADDRESS - 2601-SO-BAYSHORE DRIVE STE 1490-SIRE			2340 So MIAMI	, DIXIE	HIGHWA	94		
CITY-ST-ZIP MIAMI, FL 33133			MIAMI	FL,	3717	<u>3</u>		
TITLE NAME	☐ Delete	TITLE NAME				Change	☐ Addition	
STREET ADDRESS		STREET ADDRESS						
CITY-SI-ZIP		CITY-ST-ZIP						
TETLE	☐ Delele	TITLE				Change	☐ Addition	
NAME STREET ADDRÉSS : -		NAME STREET ADDRESS						
CITY-S1-ZIP		CITY-ST-ZIP						
TITLE	☐ Delete	TITLE				Change	Addition	
NAME STREET ADDRESS		NAME						
CITY-ST-ZIP		STREET ADORESS					ĺ	
THE C		STREET ADORESS CITY-ST-ZIP						
TITLE	☐ Delete					☐ Change	Addition	
NAME	☐ Delete	CITY-ST-ZIP TITLE NAME				Change	☐ Addition	
	☐ Delete	CITY-ST-ZIP TITLE				☐ Change	☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of the corporation or the receiver

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

Date