

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000095855

Entity Name: FREMANTLE LATIN TALENT, INC.

FILED  
Apr 29, 2005  
Secretary of State

**Current Principal Place of Business:**

5200 BLUE LAGOON DRIVE,  
SUITE 200  
MIAMI, FL 33126

**New Principal Place of Business:**

5200 BLUE LAGOON DRIVE,  
SUITE 200  
MIAMI, FL 33126

**Current Mailing Address:**

**New Mailing Address:**

FEI Number: 14-1897475      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GONZALEZ, TOMAS  
5200 BLUE LAGOON DRIVE  
SUITE 200  
MIAMI, FL 33126 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: GLUCK, DOUGLAS  
Address: 5200 BLUE LAGOON DRIVE, SUITE 200  
City-St-Zip: MIAMI, FL 33126

Title: VD ( ) Delete  
Name: GONZALEZ, CARLOS  
Address: 5200 BLUE LAGOON DRIVE, SUITE 200  
City-St-Zip: MIAMI, FL 33126

Title: T, S ( ) Delete  
Name: GONZALEZ, TOMAS  
Address: 5200 BLUE LAGOON DRIVE, SUITE 200  
City-St-Zip: MIAMI, FL 33126

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 Section 119.07(3)(i), 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: TOMAS GONZALEZ

T,S

04/29/2005

Electronic Signature of Signing Officer or Director

Date