

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000138343

Entity Name: LATIN MEDIA ENTERPRISE INC

FILED
Jun 26, 2007
Secretary of State

Current Principal Place of Business:

2600 SUNRISE LAKE DRIVE SUITE 209
SUNRISE, FL 33322

New Principal Place of Business:

Current Mailing Address:

2600 SUNRISE LAKE DRIVE SUITE 209
SUNRISE, FL 33322

New Mailing Address:

FEI Number: 20-5750095

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALMONTE, ARTURO
Address: 2600 SUNRISE LAKE DRIVE SUITE 209
City-St-Zip: SUNRISE, FL 33322

Title: VP () Delete
Name: ALMONTE, VIVIANO
Address: 2600 SUNRISE LAKE DRIVE SUITE 209
City-St-Zip: SUNRISE, FL 33322

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALMONTE, BRAD
Address: 2600 SUNRISE LAKE DRIVE SUITE 209
City-St-Zip: SUNRISE, FL 33322

Title: VP (X) Change () Addition
Name: ALMONTE, ARTURO
Address: 2600 SUNRISE LAKE DRIVE SUITE 209
City-St-Zip: SUNRISE, FL 33322

Title: VP () Change (X) Addition
Name: ALMONTE, VIVIANO
Address: 2600 SUNRISE LAKES DRIVE WEST SUITE 209
City-St-Zip: SUNRISE, FL 33322

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: VIVIANO ALMONTE

VP

06/26/2007

Electronic Signature of Signing Officer or Director

Date