

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

f
FILED
May 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P14553

(2)

1. Corporation Name
TELEMUNDO GROUP, INC.

Principal Place of Business
2290 WEST 8TH AVENUE
HIALEAH FL 33010

Mailing Address
2290 WEST 8TH AVENUE
ATTN: TAX DEPARTMENT
HIALEAH FL 33010-2017
US



2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

3. Date Incorporated or Qualified
05/21/1987

3a. Date of Last Report
05/01/1996

4. FEI Number
13-3348686

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
CD	BLACK, LEON D	2290 W 8TH AVENUE	HIALEAH FL	<input type="checkbox"/>
D	EDWARD M YORKE	2290 WEST 8TH AVENUE	HIALEAH FL	<input type="checkbox"/>
D	SPECTOR, BRUCE H	2290 WEST 8TH AVE	HIALEAH FL	<input type="checkbox"/>
D	BRON, GUILLERMO	2290 W 8TH AVE	HIALEAH FL	<input type="checkbox"/>
D	KOLOD, ALAN	2290 W 8TH AVE	HIALEAH FL	<input type="checkbox"/>
D	BARRY W. RIDINGS	2290 WEST 8TH AVENUE	HIALEAH FL	<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE <td>2.2 NAME</td> <td>2.3 STREET ADDRESS</td> <td>2.4 CITY - ST - ZIP</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td>	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE <td>3.2 NAME</td> <td>3.3 STREET ADDRESS</td> <td>3.4 CITY - ST - ZIP</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td>	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE <td>4.2 NAME</td> <td>4.3 STREET ADDRESS</td> <td>4.4 CITY - ST - ZIP</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td>	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE <td>5.2 NAME</td> <td>5.3 STREET ADDRESS</td> <td>5.4 CITY - ST - ZIP</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td>	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE <td>6.2 NAME</td> <td>6.3 STREET ADDRESS</td> <td>6.4 CITY - ST - ZIP</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td>	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 unchanged, or on an attachment with an address.

SIGNATURE: *Peter J. Houshaw II* REQUIRED

PETER J. HOUSHAW II
CPO 4-25-97 (305) 884-8200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0115659

CR2E034 (9/96)

Telemundo Group, Inc. EIN: 13-3348686
Profit Corporation Annual Report
Officers & Directors

Name, Title & Address

Roland A. Hernández President & CEO
2290 West 8th Avenue, Hialeah, FL 33010-2017

Donald J. Tringali Executive Vice President
2290 West 8th Avenue, Hialeah, FL 33010-2017

José C. Cancela Executive Vice President
2290 West 8th Avenue, Hialeah, FL 33010-2017

Stephen J. Levin Executive Vice President
2290 West 8th Avenue, Hialeah, FL 33010-2017

Peter J. Housman II CFO & Treasurer
2290 West 8th Avenue, Hialeah, FL 33010-2017

Stuart Livingston Senior Vice President, Operations & Business Affairs
2290 West 8th Avenue, Hialeah, FL 33010-2017

Osvaldo F. Torres Associate Gen. Counsel & Secretary
2290 West 8th Avenue, Hialeah, FL 33010-2017

Roland A. Hernández Director
2290 West 8th Avenue, Hialeah, FL 33010-2017

Daniel D. Villanueva Director
2290 West 8th Avenue, Hialeah, FL 33010-2017

David E. Yurkerwich Director
2290 West 8th Avenue, Hialeah, FL 33010-2017