

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

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90201 030 ***158.75

DOCUMENT # P94000064669

1. Corporation Name

LATIN AMERICAN COMMUNICATIONS, INC.

Principal Place of Business

**871 SW 124TH COURT
MIAMI FL 33184**

Mailing Address

**871 SW 124TH COURT
MIAMI FL 33184**

2. Principal Place of Business

21 3300 W. 84 ST

2a. Mailing Address

26 3300 W. 84 ST

Suite, Apt. #, etc.

22 STE 10

Suite, Apt. #, etc.

27 STE 10

City & State

23 HIALEAH, FL

City & State

28 HIALEAH, FL

Zip

24 33018

Country

Zip

29 33018

Country

30

9. Name and Address of Current Registered Agent

**PEREZ, FERMIN JR
871 SW 124TH COURT
MIAMI FL 33184**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/01/1994

4. FEI Number

65-0515860

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

PEREZ, FERMIN JR

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

3300 W. 84 ST., STE 10

83

84 City

HIALEAH

FL

85 Zip Code

33018

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

01-21-99

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE

NAME **PEREZ, FERMIN JR**
STREET ADDRESS **871 SW 124TH COURT**
CITY-ST-ZIP **MIAMI FL 33184**

TITLE **SD** ☒ DELETE

NAME **PEREZ, OFELIA**
STREET ADDRESS **871 SW 124TH COURT**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☒ Change ☐ Addition

1.2 NAME **PEREZ, FERMIN JR**
1.3 STREET ADDRESS **3300 W. 84 ST., STE 10**
1.4 CITY-ST-ZIP **HIALEAH, FL 33018**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 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

FERMIN PEREZ JR.

Date

1/21/99

Daytime Phone #

305-819-7899

CR2E034 (11/98)

0263636