

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

FILED

Apr 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000004628 (9)

1. Corporation Name
EL COLOMBIANONEWSPAPER, INC.

Principal Place of Business
3111 STIRLING ROAD
FORT LAUDERDALE FL 33312

Mailing Address
3111 STIRLING ROAD
FORT LAUDERDALE FL 33312-6566



2. Principal Place of Business 21 16308 NW 18th St Suite, Apt. #, etc.		2a. Mailing Address 26 3111 STIRLING ROAD Suite, Apt. #, etc.		3. Date Incorporated or Qualified 01/16/1996		3a. Date of Last Report	
22 City & State 23 Pembroke Pines		27 City & State		4. FEI Number 5		Applied For Not Applicable	
24 33028		28 Zip 33028		5. Certificate of Status Desired Y		\$8.75 Additional Fee Required	
25 Country 29 BEVERLY		30 Country		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent PEDERSEN, CAROLY 3111 STIRLING ROAD FORT LAUDERDALE FL 33312		10. Name and Address of New Registered Agent		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

PEDERSEN, CAROLY
3111 STIRLING ROAD
FORT LAUDERDALE FL 33312

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	FL	85 Zip Code
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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 Carol Pedersen Carol Pederson 2/17/97
NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZENNARO, ROBERTO	1.2 NAME	
STREET ADDRESS	10331 SW 135TH COURT	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33186	1.4 CITY - ST - ZIP	
TITLE	DIRECTOR	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MANTILLA, ALFRE	2.2 NAME	D MANTILLA, ALFREDO
STREET ADDRESS		2.3 STREET ADDRESS	16308 N.W. 18th St
CITY - ST - ZIP		2.4 CITY - ST - ZIP	Pembroke Pines, FL 33028
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 if changed, or on an attachment to an address.

SIGNATURE: Alfredo Mantilla 4/5/97
DIRECTOR

CR2E034 (9/96)