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

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000059821 (4)

LATIN GRAND VIDEO, INC.

Principal	Place of	Business
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Mailing Address

FILED Apr 28 1998 8:00am Secretary of State



6741 SW 24TH ST 6741 SW 24TH ST MIAMI FL 33155 MIAMI FL 33155 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/15/1996 2. Principal Place of Business 2a. Mailing Address Applied For 65-0689328 Not Applicable 21 26 Sulte, Apt. #. etc. Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be Election Campaign Financing \Box Trust Fund Contribution Added to Fees 23 28 Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 RODRIGUEZ, JULIO C 8884 **SW** 129TH ST Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33176** 83 84 City 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 protect name of respect test agreed and title if apply able. (NOTE: Registered Agont signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition Change DELETE 1.1 TITLE TITLE **GONZALEZ, CARLOS A** 1.2 NAME NAME 9320 SW 44TH ST 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33165** CITY-ST-ZIP 1.4 City-St-ZIP DELETE Change ___ Addition TITLE 2.1 TITLE GONZALEZ, MARIA C 2.2 NAME NAME 9320 SW 44TH ST 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33165** CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Change Addition 3.1 TITLE TITLE RODRIGUEZ, JULIO C 3.2 NAME NAME 8884 SW 129TH ST 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33176 CITY-ST-ZIP 3.4. CITY-\$1-ZIP DELETE Change Addition 4.1 THILE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - 7(P) Change Addition TITLE DELETE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Change DELETE 6.1 TITLE Addition TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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 suppliemental 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 chapted, or on an attachment with an address.