

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000094486

1. Entity Name

LATINMEDIA CORPORATION

FILED
May 11, 2000 8:00 am
Secretary of State

05-11-2000 90289 026 ***158.75

Principal Place of Business

8161 NW 67TH ST
 MIAMI FL 33166
 US

Mailing Address

8161 NW 67TH ST
 #51-302
 MIAMI FL 33166-2739
 US

2. Principal Place of Business

10021 NW 32nd Terr

Suite, Apt. #, etc.

3. Mailing Address

10021 NW 32nd Terr

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

65-0707838

Applied For

Not Applicable

Zip

33172

Country

USA

Zip

33172

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

CORAO, MANUEL
 8161 NW 67TH ST
 MIAMI FL 33160

7. Name and Address of New Registered Agent

Name

MANUEL CORAO

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

10021 NW 32nd Terr.

City

Miami

FL

Zip Code

33172

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/28/00

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PSTD ☐ Delete

NAME CORAO, SOSA M
 STREET ADDRESS 8161 NW 67TH ST
 CITY-ST-ZIP MIAMI FL 33166

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

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD ☒ Change ☐ Addition

NAME CORAO, MANUEL
 STREET ADDRESS 10021 NW 32nd Terr.
 CITY-ST-ZIP MIAMI, FL 33172

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00
 Date

Daytime Phone #

CR2E034 (9/99)