PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000085591

LATINO MEDIA CORPORATION

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90129 032 ***150.00



Principal Place of Business Mailing Address							- i i i i i i i i i i i i i i i i i i i	iyii ahi yi bariy backi b	ATAL CASAL ASSAL AILI	A 18(6) (16) (69)	
3345 PALM BEACH BLVD. 3345 PALM BEACH BLVD.						1					
FORT MYERS FL 33916 FORT MYERS			ERS FL 33916				DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or		nia SPACE		7
							10/06/1998	Quality			Į.
2. Principal Place of Business 2a, Mailing Address							4. EEI Number		I A	pplied For	1
21		26					65-0866664			ot Applicable	1
Suite, Apt.	#. etc.		pt. #, etc.				1			Additional	1
22		<u>⊢</u> -,	27				5. Certifcate of Status D	esired		equired	į.
City & Stat	le	City & S	State				6. Election Campaign Fi	nancing —	\$5.00	May Be	7
23		28					Trust Fund Contributi	- 11		to Fees	J
Zip Country		Zip					8. This corporation owes the current year Intangible				
24	25		29				Personal Property Tax. Yes No				1
	9. Name and Address of Curr	ent Registered Ag	ent				10. Name and Address	of New Register	ed Agent		4
040	TA OTO TO			ł	81	Name	•				1
-	ITA, STEVEN			ŀ	82	Street Addre	ss (P.O. Box Number is No	t Acceptable)			1
1	JACKSON STREET										
FUH	IT MYERS FL 33901			- 1	83						i
				}	84	City			85 Zip	Code	†
					1			<u></u>	·L		
11. Pursuant	to the provisions of Sections 607.05 registered agent, or both, in the Stat	502 and 607.1508,	Florida Statutes	, the ab	ove-r	named corpo le comoratio	ration submits this statements board of directors. I here	nt for the purpose aby accept the an	of changing its pointment as n	s registered eaistered	
agent. I a	im familiar with, and accept the oblig	gations of, Section	607.0505, Florid	la Statu	105	o oo porono.	110 00010 07 0110010101		,	9 . .	ł
SIGNATURE											l
	Signature, typed or printed name of registered as		(NOTE: R		Agent si	ignature required		DATE	AND DIRECTO	DDC (N. 42	8
12.	OFFICERS A	NO DIRECTORS		13.		ignature required	when reinstating) ADDITIONS/CHANGE:				11/98)
12. TILE	OFFICERS A	NO DIRECTORS	(NOTE: R	13. 1,1 TIT	ĿĒ	ignature required			AND DIRECTO	ORS IN 12	4 (11/98)
12. TITLE NAME	OFFICERS A D RAMOS, ANGEL	NO DIRECTORS		13. 1,1 TITI 12 NA	LE VÆ						034 (11/98)
12. TITLE NAME STREET ADDRESS	D OFFICERS A RAMOS, ANGEL 847 NUNA AVENUE	NO DIRECTORS		13. 1,1 TITI 1.2 NAV 1.3 STE	LE ME REET AC	DORESS					(2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIF	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905	NO DIRECTORS	□ DELETE	13. 1.1 TITI 1.2 NAJ 1.3 STE 1.4 CIT	LE ME REET AC Y-ST-Z	DORESS			☐ Change	Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D	NO DIRECTORS		13. 1.1 TITI 1.2 NAU 1.3 STE 1.4 CIT 2.1 TITI	LE ME REET AC Y-ST-Z	DORESS					CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA	NO DIRECTORS	□ DELETE	13. 1,1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI	LE ME REET AC Y-ST-Z LE	DDRESS TOP			☐ Change	Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA 129 GIBSON STREET	NO DIRECTORS	□ DELETE	13. 1,1 TIT 1.2 NAM 1.3 STF 1.4 CIT 2.1 TIT 2.2 NAM 2.3 STR	LE ME REET AC Y-ST-Z LE ME	DORESS .			☐ Change	Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA	NO DIRECTORS	DELETE	13. 1.1 TITI 1.2 NAJ 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAJ 2.3 STF 2.4 CIT	LE ME REET AC Y-ST-Z LE ME REET AC	DORESS .			☐ Change	Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA 129 GIBSON STREET	NO DIRECTORS	□ DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI	LE ME Y-ST-Z LE ME REET AD Y-ST-Z LE	DORESS .			☐ Change	Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA 129 GIBSON STREET	NO DIRECTORS	DELETE	13. 1.1 TITE 1.2 NAI 1.3 STF 1.4 CITE 2.1 TITE 2.2 NAI 2.3 STF 2.4 CITE 3.1 TITE 3.2 NAI	LE VE REET AC Y-ST-Z LE VE REET AC Y-ST-Z LE	DDRESS .			☐ Change	Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA 129 GIBSON STREET	NO DIRECTORS	DELETE	13. 1.1 TITE 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITE 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITE 3.2 NAI 3.3 STF	LE VAE REET AC Y-ST-Z LE VAE REET AC Y-ST-Z LE AE	DDRESS			☐ Change	Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA 129 GIBSON STREET	NO DIRECTORS	DELETE DELETE	13. 1.1 TITI 1.2 NAM 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAM 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAM 3.3 STF 3.4 CIT	LE VE REET AC Y-ST-Z LE REET AC Y-ST-Z LE AE REET AC Y-ST-Z	DDRESS			Change	Addition Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA 129 GIBSON STREET	NO DIRECTORS	DELETE	13. 1.1 TITI 1.2 NAM 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAM 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAM 3.3 STF 3.4 CIT 4.1 TITI	LE WE REET ALL LE L	DDRESS			Change	Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA 129 GIBSON STREET	NO DIRECTORS	DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CAT 3.1 TITI 3.2 NAI 3.3 STF 3.4 CAT 4.1 TITI 4.2 NAI	LE ME REET ALC LE ME LE LE LE ME LE	DDRESS			Change	Addition Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA 129 GIBSON STREET	NO DIRECTORS	DELETE DELETE	13. 1.1 TITI 1.2 NAM 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITI 3.2 NAM 3.3 STR 4.1 TITI 4.2 NAM 4.3 STR	LE REET ALL EREET ALL EREE	DDRESS DDRESS ZIP DDRESS DDRESS			Change	Addition Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA 129 GIBSON STREET	NO DIRECTORS	DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 3.4 CIT 4.2 NAI 4.3 STR 4.4 CIT 4.4 CIT	LE ME REET AC LE ME LE	DDRESS DDRESS ZIP DDRESS DDRESS			Change	Addition Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA 129 GIBSON STREET	NO DIRECTORS	DELETE DELETE	13. 1.1 TITI 1.2 NAM 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITI 3.2 NAM 3.3 STR 4.1 TITI 4.2 NAM 4.3 STR	LE ME REET AC LE ME REET AC LE ME REET AC LE ME REET AC LE ME LE M	DDRESS DDRESS ZIP DDRESS DDRESS			Change	Addition Addition Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA 129 GIBSON STREET	NO DIRECTORS	DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 4.1 TITI 4.2 NAI 4.3 STF 4.4 CIT 5.1 TITI 6.2 NAI 6.3 STF 6.4 CITI 6.5 TITI 6.5	LE ARE REET AD	DDRESS ZIP DDRESS ZIP DDRESS ZIP DDRESS			Change	Addition Addition Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA 129 GIBSON STREET	NO DIRECTORS	DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 4.2 NAI 4.3 STF 4.4 CITI 5.1 TITI 5.2 NAI	LE ME EET AD EET	DORRESS DORRESS DORRESS DORRESS DORRESS DORRESS			Change	Addition Addition Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA 129 GIBSON STREET	NO DIRECTORS	DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 4.2 NAI 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAI 5.3 STF	LE ME REET AD DE LE ME ME ME LE TAD DE LE ME ME ME LE TAD DE LE ME	DORRESS DORRESS DORRESS DORRESS DORRESS DORRESS			Change	Addition Addition Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OFFICERS A D RAMOS, ANGEL 847 NUNA AVENUE FORT MYERS FL 33905 D RIOS, ROSAURA 129 GIBSON STREET	NO DIRECTORS	DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STF 4.2 NAI 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAI 5.3 STR 5.4 CIT 5.4 CIT	LE ME REET AD DE LE ME	DORRESS DORRESS DORRESS DORRESS DORRESS DORRESS			Change Change Change	Addition Addition Addition	CR2E034 (11/98)

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 changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

