

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000085591

FILED
May 04, 2005
Secretary of State

Entity Name: LATINO MEDIA CORPORATION

Current Principal Place of Business:

7573 NW 1ST STREET
LEHIGH ACRES, FL 33972

New Principal Place of Business:

Current Mailing Address:

PO BOX 50580
FORT MYERS, FL 33905

New Mailing Address:

FEI Number: 65-0866664

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTA, STEVEN
1619 JACKSON STREET
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RAMOS, ANGEL
Address: 4906 GARCIA AVENUE
City-St-Zip: FORT MYERS, FL 33905

Title: D () Delete
Name: RIOS, ROSAURA
Address: 129 GIBSON STREET
City-St-Zip: FORT MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANGEL RAMOS

PRES

05/04/2005

Electronic Signature of Signing Officer or Director

Date