

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000090767

Entity Name: CLAXSON PLAYOUT, INC.

FILED
Feb 20, 2007
Secretary of State

Current Principal Place of Business:

1550 BISCAYNE BLVD.
2ND FLOOR
MIAMI, FL 33132

New Principal Place of Business:

1550 BISCAYNE BLVD.
MIAMI, FL 33132

Current Mailing Address:

1550 BISCAYNE BLVD.
2ND FLOOR
MIAMI, FL 33132

New Mailing Address:

1550 BISCAYNE BLVD.
MIAMI, FL 33132

FEI Number: 65-0963912

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: EZEQUIEL, PAZ
Address: 1550 BISCAYNE BLVD. 1ST FLOOR
City-St-Zip: MIAMI, FL 33132

Title: SD () Delete
Name: ARIZTOY, AMAYA
Address: 1550 BISCAYNE BLVD. 1ST FLOOR
City-St-Zip: MIAMI, FL 33132

Title: DP () Delete
Name: HAIK, RALPH
Address: 1550 BISCAYNE BLVD. 1ST FLOOR
City-St-Zip: MIAMI, FL 33132

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 Chapter 119, 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: EZEQUIEL PAZ

DT

02/20/2007

Electronic Signature of Signing Officer or Director

Date