

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000005711

**Entity Name:** UNIVISION MANAGEMENT CO.

**Current Principal Place of Business:**

500 FRANK W BURR BLVD  
TEANECK, NJ 07666

**Current Mailing Address:**

500 FRANK W BURR BLVD  
TEANECK, NJ 07666 US

**FEI Number:** 56-2301136

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            FALCO, RANDY  
Address        500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title            SECRETARY, DIRECTOR  
Name            SCHWARTZ , JONATHAN  
Address        500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title            TREASURER  
Name            MCCANN, SHAWN  
Address        500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title            ASST. SECRETARY  
Name            ACEVES , JOHN PAUL  
Address        500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title            DIRECTOR  
Name            LORI, PETER H.  
Address        500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

Title            DIRECTOR  
Name            LOPEZ-BALBOA, FRANK  
Address        500 FRANK W BURR BLVD  
City-State-Zip: TEANECK NJ 07666

*I hereby 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 all other like empowered.*

**SIGNATURE:** JOHN PAUL ACEVES

**ASST. SECRETARY**

**04/08/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date