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Jun 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000004962 (4)

1. Corporation Name

TELEvisa DTH TECHCO, INC.



Principal Place of Business

C/O GRUPO TELEvisa, S.A.
AVENIDA CHAPULTEPEC NO. 28, 5 PISO
COLONIA DOCTORES, MEXICO DF

Mailing Address

C/O GRUPO TELEvisa, S.A.
AVENIDA CHAPULTEPEC NO. 28, 5 PISO
COLONIA DOCTORES, MEXICO DF

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

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

3. Date Incorporated or Qualified

09/26/1996

3a. Date of Last Report

4. FEI Number

52-2027398

Applied for

APPLIED FOR

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
PC
DAVILA, JAIME
STREET ADDRESS
787 FIFTH AVENUE 12TH FLOOR
CITY-ST-ZIP
NEW YORK NY 10153

TITLE ☐ DELETE

NAME
VCV
ALVAREZ, JORGE
STREET ADDRESS
C/O GRUPO TELEvisa, S.A./AVENIDA CHAPULTE.
CITY-ST-ZIP
COLONIA DOCTORES, MEXICO DF

TITLE ☐ DELETE

NAME
DT
ROMANO, EMILIO
STREET ADDRESS
C/O GRUPO TELEvisa, S.A./AVENIDA CHAPULTE.
CITY-ST-ZIP
COLONIA DOCTORES, MEXICO DF

TITLE ☐ DELETE

NAME
D
MONDRAGON, JAVIER
STREET ADDRESS
C/O GRUPO TELEvisa, S.A./AVENIDA CHAPULTE.
CITY-ST-ZIP
COLONIA DOCTORES, MEXICO DF

TITLE ☐ DELETE

NAME
D
DE HARO, RAFAEL
STREET ADDRESS
C/O GRUPO TELEvisa, S.A./AVENIDA CHAPULTE.
CITY-ST-ZIP
COLONIA DOCTORES, MEXICO DF

TITLE ☐ DELETE

NAME
D
DE HARO, RAFAEL
STREET ADDRESS
C/O GRUPO TELEvisa, S.A./AVENIDA CHAPULTE.
CITY-ST-ZIP
COLONIA DOCTORES, MEXICO DF

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 supplemental 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.

SIGNATURE:

May 22 1997 (310)552-6624

CR2E034 (9/96)