

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000001494

Entity Name: TELEVISA INTERNACIONAL, LLC**Current Principal Place of Business:**6355 N.W. 36TH STREET, SUITE 309
MIAMI, FL 33166**Current Mailing Address:**6355 N.W. 36TH STREET, SUITE 309
MIAMI, FL 33166**FEI Number:** 65-0957799**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NASSER, AISHA P
6355 N.W. 36TH STREET, SUITE 309
MIAMI, FL 33166 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**Authorized Person(s) Detail :**

Title MP
Name GARCIA GONZALEZ, JOSE ANTONIO
Address AV. VASCO DE QUIROGA 2000, COL. SANTA FE,
City-State-Zip: MEXICO CITY, DF 01210

Title MVS
Name BALCARCEL SANTA CRUZ, JOAQUIN
Address AV. VASCO DE QUIROGA 2000, COL. SANTA FE
City-State-Zip: MEXICO CITY DF 01210

Title MVT
Name LUTTEROTH ECHEGOYEN, JORGE A
Address AV. VASCO DE QUIROGA 2000, COL. SANTA FE
City-State-Zip: MEXICO CITY DF 01210

Title MAS
Name DOMINGUEZ COBIAN, MARIA AZUCENA
Address AV. VASCO DE QUIROGA 2000, COL. SANTA FE
City-State-Zip: MEXICO CITY DF 01210

Title LEGAL REPRESENTATIVE
Name SPENCER, THOMAS R
Address 2655 LEJEUNE ROAD SUITE 532
City-State-Zip: CORAL GABLES FL 33190

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS R SPENCER**LEGAL REPRESENTATIVE** 03/25/2014_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date