2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004627

Title:

Name:

Address:

City-St-Zip:

FILED Sep 30, 2004 Secretary of State

		300000 1027		ocorciary or otate	
Entity Na	me: GENER	ATE ENTERTAINMENT, IN	C.		
Current Principal Place of Business:			New Prin	New Principal Place of Business:	
	ISET BLVD., 1 ELES, CA 900				
Current Mailing Address:			New Mail	New Mailing Address:	
	ISET BLVD., 1 ELES, CA 900				
FEI Number	: 20-0222834	FEI Number Applied For ()	FEI Number Not App	plicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			:: Name an	Name and Address of New Registered Agent:	
1200 SOU PLANTAT The above	PORATION SY ITH PINE ISLA ION, FL 3332 Inamed entity Inamed entity Inamed entity	AND ROAD 4 US	he purpose of changing	its registered office or registered agent, or both,	
SIGNATU					
		nic Signature of Registered	Agent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ().			
OFFICER	S AND DIREC	CTORS:	ADDITIO	NS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	HAIMOVITZ, Ĵ	BLVD., 10TH FLOOR	Title: Name: Address: City-St-Zip:	D (X) Change () Addition HAIMOVITZ, JULES 9200 SUNSET BLVD., 10TH FLOOR LOS ANGELES, CA 90069	
Title: Name: Address: City-St-Zip:	DP (LAMAINA, FRA 3003 W. OLIV BURBANK, CA	E AVE.	Title: Name: Address: City-St-Zip:	DP (X) Change () Addition LA MAINA, FRANCIS 3003 W. OLIVE AVE. BURBANK, CA 91505	
Title: Name: Address:	DS (WEISBERG, M 40 LEXINGTO NEW YORK, M		Title: Name: Address: Citv-St-Zip:	DS (X) Change () Addition GIPSON, ROBERT E 1901 AVENUE OF THE STARS LOS ANGELES. CA 90067	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: FRANCIS LA MAINA DP 09/30/2004

() Delete

SIMON, WILLIAM

3003 W. OLIVE AVE.

BURBANK, CA 91505

() Change () Addition