


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F93000002368 (9)
 1. Corporation Name
NEW WORLD COMMUNICATIONS OF TAMPA, INC.

Principal Place of Business 3213 WEST KENNEDY BOULEVARD TAMPA FL 33609	Mailing Address 10201 W. PICO BLVD ATTN: TAX DEPT. LOS ANGELES CA 90035 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29
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3. Date Incorporated or Qualified 05/20/1993	4. FEI Number 59-2636513	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
 1201 HAYS STREET
 SUITE 105
 TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code FL
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	C <input type="checkbox"/> DELETE
NAME	CAREY, CHASE
STREET ADDRESS	10201 W. PICO BLVD.
CITY-ST-ZIP	LOS ANGELES CA
TITLE	P <input type="checkbox"/> DELETE
NAME	STERN, MITCHELL
STREET ADDRESS	10201 W. PICO BLVD.
CITY-ST-ZIP	LOS ANGELES CA
TITLE	S <input type="checkbox"/> DELETE
NAME	ITZKOWITZ, JAY
STREET ADDRESS	10201 W. PICO BLVD.
CITY-ST-ZIP	LOS ANGELES CA
TITLE	T <input type="checkbox"/> DELETE
NAME	MILLER, DAVID E
STREET ADDRESS	10201 W. PICO BLVD.
CITY-ST-ZIP	LOS ANGELES CA
TITLE	D <input type="checkbox"/> DELETE
NAME	DEVOE, DAVID F
STREET ADDRESS	10201 W. PICO BLVD.
CITY-ST-ZIP	LOS ANGELES CA
TITLE	D <input type="checkbox"/> DELETE
NAME	MURDOCH, K. R
STREET ADDRESS	10201 W. PICO BLVD.
CITY-ST-ZIP	LOS ANGELES CA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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: *Raymond L. Parrish* **RAYMOND L. PARRISH** (310) 316-1557
 4/16/98

CR2E034 (10/97)