2000 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

DOCUMENT # **F95000000865**

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Principal Place of Business

SONY PICTURES CLASSICS INC

| 550 MADISON AVENUE (NEW YORK NY 10022). 2. Principal Place of Business Suite, Apt. #, etc. City & State | | 10202 W. WASHINGTON BLVD. SPP #1132 CULVER CITY CA 90232-3119 3. Mailing Address Suite, Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE | | | | | | | | | | | |
|---|--|--|--|------------------|----------------------------|--|----------|-----------------------------|-----------|--------------|---------|-----|--------------------------|------|----------------------------|-------------------------------|
| | | | | | | | | | | City & State | | | 4. FEI Number 13-3646982 | | Applied For Not Applicable | |
| | | | | | | | | | | Zip | Country | Zíp | | itry | 5. (| Certificate of Status Desired |
| | | | 6. Name and Address of Current | Registered Agent | | T | 7. 1 | Name and Address of New Reg | istered A | jent | | | | | | |
| | | | | Name | | | | | | | | | | | | |
| 1201 | PRENTICE-HALL CORPORATION 1 HAYS ST., #105 LAHASSEE FL 32301 | system, inc. | STEM, INC. | | (P.O. B | iox Number is Not Acceptable) | | | | | | | | | | |
| | | | ** | City | | | FL. | Zip Code | | | | | | | | |
| SIGNATURE Signature, typed or printed name of registered agent and to 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See criteria on back) | | FILE NOW After MAY 1, 2 | FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of S | | | 10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees | | | | | | | | | | |
| 11. OFFICERS AND | | DIRECTORS | RECTORS 12. | | ΑC | DITIONS/CHANGES TO OFFICE | RS AND I | DIRECTORS IN 1 | 1 | | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD BARKER, MICHAEL 550 MADISON AVE. NEW YORK NY 10022 | □ Delete | | - L | | | | ☐ Change ☐ / | Addition | | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD BERNARD, TOM 550 MADISON AVE. NEW YORK NY 10022 | ☐ Delete | | | | | | ☐ Change ☐ / | Addition | | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD BLOOM, MARCIE 550 MADISON AVE. NEW YORK NY 10022 | M, MARCIE HADISON AVE. | | E see Exhi | bit | ete list of office A attached hereto by this reference | and | | | | | | | | | |
| TITLE NAME STREET ADDRESS | D BERKE, BETH | ☐ Delete | TITL NAM STR | | | | : | ☐ Change ☐ / | Addition | | | | | | | |

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

Leah Weil,

EVCFO

SINGH, BEDI A.

10202 W. WASHINGTON BLVD.

CULVER CITY, CA 90232

TITLE

NAME

TITLE

NAME

Delete

Delete

CULVER CITY CA 90232

CULVER CITY CA 90232

HOWELLS, EDGAR H JR

CULVER CITY CA 90232

10202 W. WASHINGTON BLVD.

10202 W. WASHINGTON BLVD.

JACOBI, RONALD N

VSD

VDCE

SIGNATURE: PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Senior Vice Pres. & Asst. Sec. 1/27/2000 310-244-4683

☐ Change

☐ Change

☐ Addition

Addition

FILED

Feb 10, 2000 8:00 am Secretary of State

02-10-2000 90019 006 ***150.00