2000 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

1515 BROADWAY

% MICHAEL D. FRICKLAS

NEW YORK NY 10036-8901

DOCUMENT # F9700001611

1. Entity Name

... BROADWAY

NEW YORK NY 10036

Principal Place of Business

C/O PHILIPPE P. DAUMAN

SIGNATURE:

PARAMOUNT STATIONS GROUP, INC.

S							AANIN BAKAK	irara digi ilah	1 (1 1) 10 (1)	
2. Principal P 5555 M	Place of Business elrose Ave.	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN	I THIS S	PACE		
City & Stat	e	City & State			4. F	4. FEI Number 54-1169960 Applied For				
Los Ang	eles	CA			34 1103300			t Applicable		
Zip 90038	Country USA			try	5. 0	Certificate of Status Desired		\$8.75 Addi Fee Required		
30030	6. Name and Address of Current Re	gistered Agent			7. N	Name and Address of New Regis	tered A	gent		
				Name						
THE PRENTICE-HALL CORPORATION SYSTEM, INC.				Street Address (P.O. Box Number is Not Acceptable)						
	HAYS STREET	•		Sueet Address (F.O. DOX Multiper is Not Acceptable)						
TALL	AHASSEE FL 32301									
				City				Zip Code		
				City			FL	Zip Code		
8. The above	named entity submits this statement for the	ne purpose of changing its	registere	ed office or	registered age	ent, or both, in the State of Florida				
	•									
SIGNATURE .						·				
orar traine.	Signature, typed or printed name of registered agent and	title if applicable. (NOTE	: Registere	d Agent signatu	required when re	einstating)	DATE			
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FI				IS \$150.00					•	
Tax filing requirement and elects to do so. After MAY 1, 20				•		 Election Campaign Finance Trust Fund Contribution. 	ing □		O May Be to Fees	
(See criter	ria on back)	Make Check Payab	le to De	epartment	of State	nostrano commodion.		ADDEO	10 / 603	
11.	OFFICERS AND DI	RECTORS	12.		AD	DITIONS/CHANGES TO OFFICE	RS AND	DIRECTORS	3 IN 11	
TITLE	P	☐ Delete	TITLE				_	☐ Change	☐ Addition	
NAME	CASSARA, ANTHONY		NAM	E						
STREET ADDRESS	5555 MELROSE AVE.		STRE	ET ADDRESS						
CITY-ST-ZIP	LOS ANGELES CA 90036		CITY	-ST-ZIP						
TITLE	SVAS	☐ Delete TITL		Ē	SVP AS	D		Change	Addition	
NAME	FRICKLAS, MICHAEL D				MICHAE	CHAEL D. FRICKLAS				
STREET ADDRESS	1515 BROADWAY			ET ADDRESS		5 Broadway				
CITY-ST-ZIP	NEW YORK NY 10036		CITY	- \$T - ZIP 	New Yor	rk, NY 10036			·	
TITLE	AS	☐ Delete	TITLE					Change	Addition	
NAME	STACK, ILENE W		NAM							
STREET ADDRESS	1515 BROADWAY			ET ADDRESS -ST-ZIP						
CITY-ST-ZIP	NEW YORK NY 10036									
TITLE	DEVS	□X Delete	TITLE	·				Change	☐ Addition	
NAME	Daumann, Philppe P 1515 Broadway		MAM	ET ADDRESS						
STREET ADDRESS CITY-ST-ZIP	NEW YORK NY 10036			-ST- <i>ZIP</i> 1						
	DCFO		-					☐ Change	Addition	
TITLE Name	SMITH, GEORGE S JR	Delete	TITLE					L_1 Change	AQQIIIDII	
STREET ADDRESS	1515 BROADWAY			ET ADDRESS						
CITY-ST-ZIP	NEW YORK NY 10036			-ST-ZIP						
	AS	□X Delete	TITLE					☐ Change	Addition	
TITLE NAME	LIOTTA, MICHAEL A	LA Delete	NAM	1						
STREET ADDRÉSS	1515 BROADWAY			ET ADDRESS						
CITY-ST-ZIP	NEW YORK NY 10036			-ST-ZIP						

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 thistee 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 attachmen with an address, with all other like empowered.

ED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ilene W. Stack, Ass't. Secty

FILED

Mar 06, 2000 8:00 am Secretary of State

03-06-2000 90101 029 ***150.00