2004 FOR PROFIT CORPORATION ANNUAL REPORT

四部學園的學院 (4) (第二十二)

Sep 09, 2004 8:00 am Secretary of State DOCUMENT # P03000068952 09-09-2004 90008 020 ***558.75 CONCACAF MARKETING & TV, INC. Principal Place of Business Mailing Address **24084081** 725 FIFTH AVE., 17TH FLOOR 725 FIFTH AVE., 17TH FLOOR NEW YORK, NY 10022 NEW YORK, NY 10022 2. Principal Place of Business 1441 BRICKELL 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc 07142004 CR2E034 (10/03) 180VE A5 グロハモ City & State City & State 4. FEI Number Applied For 27-006321 Not Applicable Zip Country \$8.75 Additional ふ タラノシノ U.S. X. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 City 8. 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agen; signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Trust Fund Contribution. \Box Added to Fees # Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. CHAIRMAN ☐ Delete Addition TITLE ☐ Change TITLE NAME NAME JACK WARNER STREET ADDRESS STREET ADDRESS 725 FIFTH AVE. - 17FL NEW YURK, N.Y. 100W CITY-ST-ZIP CITY-ST-ZIP PRESIDENT TITLE Change Addition TITLE NAME CHUCK BLAZER STREET ADDRESS STREET ADORESS 725 FIFTH AVE - 17FL CITY-ST-7#P CITY-ST-ZIP NEW YORK, JECKETARY TIDE Addition TITLE Change JOSEPH TARANTO NAME NAME 725 FIFTH AVE - 17FL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Change ☐ Defete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

CITY-ST-ZIP

JOSEAN E. TARANTO SECY SIGNATURE TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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