2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 17, 2001 08:00 AM DOCUMENT # F9300001359 1. Entity Name **Secretary of State** DISNEY INTERNATIONAL EMPLOYMENT SERVICES, INC. Principal Place of Business Mailing Address 1515 LAKE BUENA VISTA DRIVE 500 SOUTH BUENA VISTA STREET CASTING BLDG., SUITE 160 LAKE BUENA VISTA FL BURBANK CA 32830 915210586 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 95-4311777 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent IOPPOLO FRANK 1375 BUENA VISTA DRIVE Street Address (P.O. Box Number is Not Acceptable) 4TH FLOOR NORTH LAKE BUENA VISTA FL32830 US Zip Code 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. SIGNATURE 04/17/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE CR2E034 (11/00) ☐ Delete TITLE X Addition ☐ Change MAME NAME SANTANIELLO JOSEPH STREET ADDRESS STREET ADDRESS 500 S BUENA VISTA STREET CITY-ST-ZIP BURBANK CITY-ST-ZIP 91521 ☐ Delete TITLE ☐ Change NAME THOMPSON, DAVID K. NAME STREET ADDRESS 500 SOUTH BUENA VISTA STREET STREET ADDRESS CITY-ST-ZIP BURBANK CA 91521 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition BUETTNER, ANNE L. NAME STREET ADDRESS 500 SOUTH BUENA VISTA STREET STREET ADDRESS CITY-ST-ZIP BURBANK CA 91521 CITY-ST-ZIP ☐ Delete TITLE Change Change Addition REED, MARSHA L. NAME STREET ADDRESS 500 SOUTH BUENA VISTA STREET STREET ADDRESS CITY-ST-ZIP BURBANK CA 91521 CITY-ST-ZIP TITLE ☐ Delete TITLE X Change ☐ Addition LITVACK, SANFORD M. NAME CHAPMAN' BRETT STREET ADDRESS 500 SOUTH BUENA VISTA STREET STREET ADDRESS 500 SOUTH BUENA VISTA STREET CITY-ST-ZIP BURBANK CA 91521 CITY-ST-ZIP BURBANK $\mathbf{C}\mathbf{A}$ 91521 ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-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 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.

04/17/2001

Date

Daytime Phone #

REED, MARSHA L.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _