

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000004894

1. Entity Name
L90, INC.

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 91363 001 ***158.75

Principal Place of Business
2020 SANTA MONICA BLVD., SUITE 400
SANTA MONICA CA 90404

Mailing Address
2020 SANTA MONICA BLVD., SUITE 400
SANTA MONICA CA 90404

767950



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4499 Glencoe Avenue
Suite, Apt. #, etc.
Marina Del Rey, CA
City & State
90292 USA
Zip Country

3. Mailing Address
4499 Glencoe Avenue
Suite, Apt. #, etc.
Marina Del Rey, CA
City & State
90292 USA
Zip Country

4. FEI Number ~~95-4761069~~ 95-4761069 Applied For
Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD APFELBAUM, WILLIAM M 2020 SANTA MONICA BLVD., SUITE 400 SANTA MONICA CA 90404	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO BOHAN, JOHN C 2020 SANTA MONICA BLVD., SUITE 400 SANTA MONICA CA 90404	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO SEBASTIAN, THOMAS A 2020 SANTA MONICA BLVD., SUITE 400 SANTA MONICA CA 90404	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD CARDINALI, CHRISTOPHER J 2020 SANTA MONICA BLVD., SUITE 400 SANTA MONICA CA 90404	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BICKERTON, LUCREZIA 2020 SANTA MONICA BLVD., SUITE 400 SANTA MONICA CA 90404	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4499 Glencoe Avenue Marina Del Rey, CA 90292
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4499 Glencoe Avenue Marina Del Rey, CA 90292
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4499 Glencoe Avenue Marina Del Rey, CA 90292
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 4499 Glencoe Avenue Marina Del Rey, CA 90292
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Secretary Huie, Peter 4499 Glencoe Avenue Marina Del Rey, CA 90292

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.

SIGNATURE: _____ 4/5/01 (310) 751-0200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

4/30/01

CORPORATE DETAIL RECORD SCREEN

1:31 PM

NUM: F00000004894 ST:DE ACTIVE/FOREIGN PROF FLD: 08/30/2000

FEI#: 95-4673399

NAME : L90, INC.

PRINCIPAL: 2020 SANTA MONICA BLVD., SUITE 400

ADDRESS SANTA MONICA, CA 90404

RA NAME : CORPORATION SERVICE COMPANY

RA ADDR : 1201 HAYS STREET

TALLAHASSEE, FL 32301-2525 US

ANN REP : * NONE FILED *

Attachment

#F00000004894

767950

1. MENU, 3. OFFICERS, 7. LIST, 8. NEXT, 9. PREV

ENTER SELECTION AND CR: