

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000004698

**Entity Name:** HTV DIGITAL WORKS INC.**Current Principal Place of Business:**300 W 57TH STREET  
NEW YORK, NY 10019**Current Mailing Address:**300 W 57TH STREET  
NEW YORK, NY 10019 US**FEI Number: 81-2591341****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US*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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	D,P
Name	WERTILIEB, JORDAN M
Address	300 W 57TH STREET
City-State-Zip:	NEW YORK NY 10019
Title	VP, FINANCE
Name	HERRIOTT, STANLEY
Address	300 W 57TH STREET
City-State-Zip:	NEW YORK NY 10019
Title	ASSISTANT TREASURER
Name	KORS, DAVID L
Address	3540 TORINGDON WAY
City-State-Zip:	CHARLOTTE NC 28277
Title	S
Name	BOSTRON, CATHERINE A
Address	300 W 57TH STREET
City-State-Zip:	NEW YORK NY 10019

Title	D,SVP,T
Name	DRAIN, JOHN J
Address	300 W 57TH STREET
City-State-Zip:	NEW YORK NY 10019
Title	VP
Name	KEATING, ROGER
Address	300 W 57TH STREET
City-State-Zip:	NEW YORK NY 10019
Title	ASSISTANT TREASURER
Name	MCDONALD, WARREN K
Address	3540 TORINGDON WAY
City-State-Zip:	CHARLOTTE NC 28277
Title	ASST. SECRETARY
Name	REDMAN, MARK
Address	300 WEST 57TH STREET
City-State-Zip:	NEW YORK NY 10019

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: DAVID L. KORS****ASSISTANT TREASURER 04/30/2024**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date