

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # 801501**

1. Entity Name

**CBS CORPORATION****FILED**  
**Feb 01, 2000 8:00 am**  
**Secretary of State**

02-01-2000 90029 007 \*\*\*150.00

Principal Place of Business

Mailing Address

ATTN: LICENSE ADMINISTRATOR  
TELE-COMPUTER CENTER-BOX 8839  
PITTSBURGH PA 15221TAX DEPARTMENT  
11 STANWIX ST  
PITTSBURGH PA 15222-1312

2. Principal Place of Business

51 West 52nd Street

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

New York, NY

City &amp; State

4. FEI Number

25-0877540

Applied For

Not Applicable

Zip

10019

Country

USA

Zip

Country

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2000 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	<input type="checkbox"/> Delete
VPS	STRAKA, A.C.	11 STANWIX STREET	PITTSBURGH PA	<input type="checkbox"/>
VP	REYNOLDS, F. G.	11 STANWIX STREET	PITTSBURGH PA	<input type="checkbox"/>
T	MORF, C.E.	11 STANWIX STREET	PITTSBURGH PA	<input checked="" type="checkbox"/>
AC	DUNN, D.E.	BRINTON ROAD @ PARKWAY E.	PITTSBURGH PA	<input checked="" type="checkbox"/>
CD	MICHEAL H JORDAN	11 STANWIX ST	PITTSBURGH PA	<input checked="" type="checkbox"/>
D	CARLUCCI, FRANK C	1001 PENNSYLVANIA AVE.	WASHINGTON DC 20004-2505	<input checked="" type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
Vice President & Treasurer	Suleman, Farid	40 West 57th Street	New York, NY 10019	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Vice President	Briskman, Louis J.	51 West 52nd Street	New York, NY 10019	<input type="checkbox"/>	<input checked="" type="checkbox"/>
President & CEO	Karmazin, Mel A.	51 West 52nd Street	New York, NY 10019	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Director	McLaughlin, David T.	40 West 57th Street	New York, NY 10019	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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: *Isidore M. Bachy* **Isidore M. Bachy, Assistant**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Secretary

1/10/2000

412-642-5260

Date

Daytime Phone #