

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **835834** (3)

1. Corporation Name
KATZ COMMUNICATIONS, INC.

Principal Place of Business 125 W 55TH ST NEW YORK NY 10014	Mailing Address 125 W 55TH ST NEW YORK NY 10019-5369
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3. Date Incorporated or Qualified 02/25/1976	3a. Date of Last Report 04/03/1996
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2. Principal Place of Business	2a. Mailing Address
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21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
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22 City & State	27 City & State
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23 Zip	25 Country	29 Zip	30 Country
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4. FEI Number 13-0904500	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No
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9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

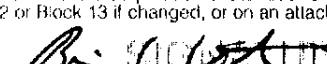
12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
	DPCE	OLSON, THOMAS F.	125 WEST 55TH STREET NEW YORK NY	
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
	D	BELOYIANIS, JAMES E.	125 WEST 55TH STREET NEW YORK NY	
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
	D	OLDS, STUART O.	125 WEST 55TH STREET NEW YORK NY	
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
	COO	VENDIG, RICHARD E	125 WEST 55 TH ST NEW YORK NY	
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
	AS	WATSON, BRIAN	125 WEST 55TH STREET NEW YORK NY 10019	
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
	VPS	BELOYIANIS, JAMES E.	125 WEST 55TH STREET NEW YORK NY	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **BRIAN O. WATSON** 4/17/97 (212) 424-6569

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)