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

## FILED **DOCUMENT #835834** Apr 21, 2000 8:00 am Secretary of State 1. Entity Name KATZ COMMUNICATIONS, INC. 04-21-2000 90155 032 \*\*\*150.00 Mailing Address Principal Place of Business 125 W 55TH ST 125 W 55TH ST NEW YORK NY 10019-5369 NEW YORK NY 10014 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 13-0904500 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS President 🔀 Delete ★ Addition TITLE TITLE Kenneth J O'Keefe BELOYIANIS, JAMES E. NAME NAME STREET ADDRESS 125 WEST 55TH STREET STREET ADDRESS 125 W 55th St CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY New York, NY 10019 ☐ Addition Delete TITLE ☐ Change TITLE OLDS, STUART O. NAME STREET ADDRESS STREET ADORESS 125 WEST 55TH STREET CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY Delete Addition Change TITLE TITLE VP, CFO DAMON, ROBERT NAME NAME D Geoffrey Armstrong STREET ADDRESS STREET ADDRESS 125 WEST 55 TH ST 125 W 55th St CITY-ST-ZIP **NEW YORK NY** CITY-ST-ZIP New-York, NY 10019 ☐ Change X Addition TITLE X Delete Senior 'VP WATSON, BRIAN NAME NAME W Schuyler Hansen STREET ADDRESS 125 WEST 55TH STREET STREET ADDRESS 125 W 55th St CITY-ST-ZIP CITY-ST-7IP NEW YORK NY 10019 New York, NY 10019 Change x Addition ☐ Delete TITLE TITLE VP BELOYIANIS, JAMES E. NAME NAME William Banowsky STREET ADDRESS STREET ADDRESS 125 WEST 55TH STREET 125 W 55th St CITY-ST-7IP CITY-ST-7IP **NEW YORK NY** New York, NY 10019 ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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:



4/11/2000

(212) 424-6569

Daytime Pt