## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED May 01, 2002 8:00 am Secretary of State

DOC	UMENT # 843943		7. 10	, DK)	Secretary of	
1. Entity N	lame			•	05-01-2002 91 525 042	? ***150.00
ORIC	ON PICTURES DISTRIBUT	ON CORPORATI	ON	,		
2002	2					
<b>克里</b>	A STATE OF THE STA				-	
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			SFAC	ا المارات المارات المارات		
	Principal Place of Business     3. Mailing Address		A CONTRACTOR OF THE PROPERTY O			
2500 BROADWAY STREET Suite, Apt. #, etc.		2500 BROADWAY STREET		TREET		
TAX DEPARTMENT		Suite, Apt. #, etc. TAX DEPARTMENT			DO NOT WRITE IN THIS SPACE	
City & State		City & State			A FELNumber	
Zip	A MONICA, CA Country	SANTA MONICA, CA		A	95-3304776	Applied For Not Applicable
90404	4 U.S.A.	<sup>Zip</sup> 90404	Cour	ntry S.A.		75 Additional
				7 — — —	Fee I	Required
ir direct	DOMOTW			r mame		nt
DO NOT WRITE				CT CORPORATION SYSTEM  Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD.		
IN THIS SPACE				1200 SOUT	H PINE ISLAND RD.	
Alter Man		The second secon	The second secon	City PLANTATIO	N FL 3	3324
8. The above	e named entity submits this statement for	the purpose of changing	its registere	ed office or registere	d agent, or both, in the State of Florida	3324
SIGNATURE						
ı	Signature, typed or printed name of registered agent an	d title if applicable. (N	OTE: Registered	Agent signature required w	THE (PRINTING)	
9. This corp	oration is eligible to satisfy its Intangible	January 11-	May 1 Fe	e is \$150 oo		
l ax filing	requirement and elects to do so.	Amenda Amend	y 1, Fee is	\$550.00		\$5.00 May Be
11.		make Check Pay	able to De	partment of State	Trust Fund Contribution.	Added to Fees
TITLE	OFFICERS AND D PRESIDENT	RECTORS	Wine.			
NAME,	ROBERT LEVIN		NAME.		The state of the s	117-4
STREET ADDRESS CITY-ST-ZIP	2500 BROADWAY STREET		STREET	TADORESS :		
TITLE	SANTA MONICA, CA 90 SECRETARY	0404	CITY-S	ST=ZIP.		
NAME	WILLIAM A. JONES		TITLE		A CONTRACT OF THE CONTRACT OF	7
STREET ADDRESS CITY-ST-ZIP	2500 BROADWAY STREET			AODRESS	The state of the s	
TITLE	VICE PRESIDENT & OPI	)404	CITY-S	T-ZIP	The state of the s	
NAME	DEBORAH J. ARVESEN	K. CONTROLLE	****			
STREET ADDRESS	2500 BROADWAY STREET		NAME	ADDRESS	14 (14 (14 (14 (14 (14 (14 (14 (14 (14 (	
CITY-ST-ZIP		1404	CITY-ST	· : : : : : : : : : : : : : : : : : : :	DO NOT WRITE	
TITLE NAME	VICE PRESIDENT & GEN JAY RAKOW	IERAL COUNSEL	ine		to the second se	
STREET ADDRESS	2500 BROADWAY STREET	•	NAMI,	Toopers	IN THIS SPACE	A. A. milion
City-SI-ZIP	SANTA MONICA, CA 90404		#STREET A #CITY-ST		The state of the s	f setting.
TITLE NAME	CFO DANIEL J. TAYLOR 2500 BROADWAY STREET		TITLE			
STREET ADDRESS					A STATE OF THE STA	et.
CITY-ST-ZIP		404	STREET A			
TITLE			UII 1- 31-	eir.		.7.78
			TIPE CO.	(1) (1) (1) (1)	The second secon	
NAME STREET ADDRESS			TITLE		The state of the s	
NAME STREET ADDRESS CITY-SI-ZIP			200000000000000000000000000000000000000	DDRESS		

of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes. I further certify that the information 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 on an

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(310) 449-3000 Daytime Phone #