FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 18 PM 6:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 855045 (1)

1. Corporation Name
ENTERTAINMENT PUBLICATIONS, INC.

Principal Place of Business
2125 BUTTERFIELD
TROY MI 48084

Mailing Address
2125 BUTTERFIELD
TROY MI 48084

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/21/1982
3a. Date of Last Report: 06/28/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: 38-1706386 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
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 — FL — 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 _____ (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	POTIKER, HUGHES L	1.2 NAME	ROBERT M. SARKIS	
STREET ADDRESS	1516 W. LONG LAKE RD.	1.3 STREET ADDRESS	552 WILSHIRE	
CITY-ST-ZIP	BLOOMFIELD HILLS MI	1.4 CITY-ST-ZIP	BLOOMFIELD HILLS, MI 48013	
TITLE	VT	2.1 TITLE	SENIOR V. P.	☒ Change ☐ Addition
NAME	MCBREARTY, JOHN H.	2.2 NAME	DENNIS CURRIER	
STREET ADDRESS	448 HUNT MASTER CT.	2.3 STREET ADDRESS	565 WOODDALE ROAD	
CITY-ST-ZIP	BLOOMFIELD HILLS MI	2.4 CITY-ST-ZIP	BLOOMFIELD HILLS, MI 48301	
TITLE	SD	3.1 TITLE	SECRETARY	☒ Change ☐ Addition
NAME	POTIKER, SHEILA M	3.2 NAME	MARSHA K. EISENBERG	
STREET ADDRESS	1516 W. LONG LAKE RD.	3.3 STREET ADDRESS	4430 DOW RIDGE	
CITY-ST-ZIP	BLOOMFIELD HILLS MI	3.4 CITY-ST-ZIP	ORCHARD LAKE, MI 48324	
TITLE	EVP	4.1 TITLE	EXECUTIVE V. P.	☒ Change ☐ Addition
NAME	GREEN, KELLY	4.2 NAME	MARK METCALFE	
STREET ADDRESS	2125 BUTTERFIELD	4.3 STREET ADDRESS	680 VIEWWOOD	
CITY-ST-ZIP	TROY MI	4.4 CITY-ST-ZIP	BIRMINGHAM, MI 48009	
TITLE	SVP	5.1 TITLE		☐ Change ☐ Addition
NAME	CORGLIANO, COSMO	5.2 NAME		
STREET ADDRESS	707 SUMMER ST.	5.3 STREET ADDRESS		
CITY-ST-ZIP	STAMFORD CT	5.4 CITY-ST-ZIP		
TITLE	C	6.1 TITLE		☐ Change ☐ Addition
NAME	KOTULA, MARK	6.2 NAME		
STREET ADDRESS	502 CHARLOTTE	6.3 STREET ADDRESS		
CITY-ST-ZIP	ROYAL OAK MI	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: X _____ 4/12/95 (810) 637-8479
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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