2002 UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE:

with all other

Mar 22, 2002 8:00 am Secretary of State DOCUMENT # F00000000058 1. Entity Name 03-22-2002 90012 015 ***150.00 MJI BROADCASTING, INC. Principal Place of Business Mailing Address 200 EAST BASSE RD 200 EAST BASSE RD 481650nn SAN ANTONIO TX 78209 SAN ANTONIO TX 78209 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. 200 E Basse 200 E Basse K Suite, Apt. #, etc. AH-nolbert Attn DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For 13-3037059 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code City 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, 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Change ☐ Addition ☐ Delete TITLE . NAME NAME MAYS, L LOWRY STREET ADDRESS STREET ADDRESS 200 EAST BASSE RD CITY-ST-ZIP CITY-ST-ZIP SAN ANTONIO TX 78209 TITLE ☐ Change ☐ Addition TITLE VSTD ☐ Delete NAME NAME MAYS, MARK P STREET ADDRESS STREET ADDRESS 200 EAST BASSE RD CITY-ST-ZIP CITY-ST-7IP SAN ANTONIO TX 78209 TITLE Delete TITLE Change ☐ Addition **VSD** NAME NAME MAYS, RANDALL T STREET ADORESS STREET ADDRESS 200 EAST BASSE RD CITY-ST-ZIP CITY-ST-ZIP SAN ANTONIO TX 78209 ☐ Delete TITLE ☐ Change ☐ Addition NAME ROSALES, STEPHANIE STREET ADDRESS STREET ADDRESS 200 EAST BASSE RD CITY-ST-ZIP CITY-ST-ZIP SAN ANTONIO TX 78209 ☐ Delete Change ☐ Addition NAME KITCHIN, KRAIG T STREET ADDRESS STREET ADDRESS 15260 VENTURA BLVD #500 CITY-ST-ZIP CITY-ST-ZIP SHERMAN OAKS CA 91403 ☐ Delete TITLE Change ☐ Addition NAME NAME KELLY, TIMOTHY STREET ADDRESS STREET ADDRESS 15260 VENTURA BLVD #500 CITY-ST-7IP CITY-ST-7IP SHERMAN OAKS CA 91403 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 of the corporation or the receiver of the corporation or the receiver 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

FILED