2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2001 8:00 am
Secretary of State
05-02-2001 90073 025 ***150.00

DOCUMENT # F00000000423

1. Entity Name
SCREAMINGMEDIA INC.

Principal Place of Business
601 WEST 26TH STREET, 13TH FLOOR
NEW YORK NY 10001

Mailing Address
601 WEST 26TH STREET, 13TH FLOOR
NEW YORK NY 10001

00041000

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

4. FEI Number 13-4042678 | Applied For | Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City | FL | 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 _____
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 Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	ELLMAN, ALLAN S	NAME	
STREET ADDRESS	210 WEST 70TH STREET, APT. 1005	STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10023	CITY-ST-ZIP	
TITLE	DCEO ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CLARK, KEVIN C	NAME	
STREET ADDRESS	601 WEST 26TH STREET, 13TH FLOOR	STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10001	CITY-ST-ZIP	
TITLE	T ☒ Delete	TITLE	T ☐ Change ☒ Addition
NAME	BOLING, ROY R	NAME	Peck, Robert B.
STREET ADDRESS	601 WEST 26TH STREET, 13TH FLOOR	STREET ADDRESS	22 Thousand Oaks Terrace
CITY-ST-ZIP	NEW YORK NY 10001	CITY-ST-ZIP	Howell, NJ 07731
TITLE	SD ☒ Delete	TITLE	☐ Change ☐ Addition
NAME	KELLY, WILLIAM P	NAME	
STREET ADDRESS	305 BROADWAY	STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10007	CITY-ST-ZIP	
TITLE	CD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CHIAT, JAY	NAME	
STREET ADDRESS	135 CRESTVIEW LANE	STREET ADDRESS	
CITY-ST-ZIP	SAGANPONACK NY 11962	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	ROBINSON, JAMES D	NAME	
STREET ADDRESS	126 EAST 56TH STREET	STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10022	CITY-ST-ZIP	

CR2E034 (10/00)

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 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: Robert B. Peck Robert B. Peck 4/2/01 212 6591014
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #