2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# F00000004891

Entity Name: AST SUB, INC.

Current Principal Place of Business:

1 HSN DRIVE
ST. PETERSBURG, FL 33729

New Principal Place of Business:

Current Mailing Address:

1 HSN DRIVE
ST. PETERSBURG, FL 33729

New Mailing Address:

FEI Number: 59-3614109 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SCHMELING, JUDY
Address: 1 HSN DRIVE
City-St-Zip: ST. PETERSBURG, FL 33729

Title: AT ( ) Delete
Name: ATTINELLA, MICHAEL
Address: 1 HSN DR
City-St-Zip: SAINT PETERSBURG, FL 33729

Title: T ( ) Delete
Name: DEGRAW, ERIC
Address: 152 WEST 57TH STREET
City-St-Zip: NEW YORK, NY 10019

Title: AS ( ) Delete
Name: BLATT, GREG
Address: 152 W 47TH ST
City-St-Zip: NEW YORK, NY 10019

Title: AT ( ) Delete
Name: GASPARINI, BEN
Address: 1 HSN DR
City-St-Zip: ST PETERSBURG, FL 33729

Title: SD (X) Delete
Name: WARNER, JAMES P
Address: 1 HSN DRIVE
City-St-Zip: ST. PETERSBURG, FL 33729

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP/T (X) Change ( ) Addition
Name: HURLEY, MICHAEL
Address: 1 HSN DR.
City-St-Zip: ST. PETERSBURG, FL 33729

Title: SD (X) Change ( ) Addition
Name: WARNER, JAMES P
Address: 1 HSN DRIVE
City-St-Zip: ST. PETERSBURG, FL 33729

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES P. WARNER SEC. 04/15/2009

Electronic Signature of Signing Officer or Director — Date