## **2005 FOR PROFIT CORPORATION ANNUAL REPORT**

## **FILED** May 03, 2005 8:00 am Secretary of State 05-03-2005 90176 043 \*\*\*150.00

1. Entity Nam	MEN I # FUUUUUUUU69 *AN MEDIA CONSUMER ENT				03-03-2003	70170 043	70.00	
Principal Place of Business 1000 AMERICAN MEDIA WAY STE. A BOCA RATON, FL 33464-1000		Mailing Address 190 CONGRESS PARK DR. STE. 200 DELRAY BEACH, FL 33445			20055915			
2. Principal Place of Business		New Mailing Address						
Suite, Apt. #, etc.		c/o Tax Department 1000 American Media Way Boca Raton, FL 33464-1000		04292005	Chg-P	CR2E034 (10/03)		
City & State				4. FEI Number 65-09638	52	<del></del>	oplied For	
Zip	Country			5. Certificate of		S8.75 Add	ditional	
	6. Name and Address of Current Re	gistered Agent		7. Name and Ac	Idress of New Re	gistered Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Name  Street Address (P.O. Box Number is Not Acceptable)				
			City			FL Zip Cod	6	
	named entity submits this statement for the ions of registered agent.	ne purpose of changing its re	gistered office or	registered agent, or both, i	in the State of Flor		and accept	
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign	Financing	\$5.00 May Be Added to Fees		DATE		
10.	OFFICERS AND DI	RECTORS	11.	The state of the s	IANGES TO OFFIC	CERS AND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD PECKER, DAVID 5401 N.W. BROKEN SOUND BLVD BOCA RATON, FL 33487	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD Pecker, David 1000 American Me Boca Raton, FL 33-		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO MILEY, JOHN 5401 N.W. BROKEN SOUND BLVI BOCA RATON, FL 33487	Delete D.	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Seiden, Mindy 1000 American Med Boca Raton, FL 33		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD KAHANE, MIKE 5401 N.W. BROKEN SOUND BLVI BOCA RATON, FL 33487	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Kahane, Mike 1000 American Med Boca Raton, FL 334		Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	See Attachment Additional Dire		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADORESS City-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-7IP		,	☐ Change	Addition	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MINDY SEIDEN 4 20 5 (50) 297-7732

SIGNATURE:

## ATTACHMENT

20055915 HF00000006988

American Media Consumer Entertainment, Inc. FEI Number 65-0963852 Additional Directors

Austin Beutner D
Anthony DiNovi D
Neeraj Mital D
Soren Oberg D
Michael Neil Garin D

## <u>Address</u>

1000 American Media Way Boca Raton, FL 33464-1000