

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90176 028 ***150.00

DOCUMENT # F0100000248

1. Entity Name
BLACK ENTERTAINMENT TELEVISION, INC.



Principal Place of Business
**1235 W STREET, N.E.
WASHINGTON, DC 20018-1211**

Mailing Address
**1515 BROADWAY
NEW YORK, NY 10036**

94069323



2. Principal Place of Business

3. Mailing Address

1515 Broadway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

c/o Michael Fricklas

03192004

Chg-P

CR2E034 (10/03)

City & State

City & State

New York, NY

4. FEI Number

52-1163903

Applied For

Not Applicable

Zip

Country

Zip

10036

Country

USA

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when retesting.)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PCOO
LEE, DEBRA L
1235 W STREET, N.E.
WASHINGTON, DC 200181211**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPAS
FUERST, JANE R
1515 BROADWAY
NEW YORK, NY 10036**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
MERCHANT, BYRON
1235 W STREET, N.E.
WASHINGTON, DC 200181211**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP/D
Susan C. Gordon
1515 Broadway
New York, NY 10036**

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CD
JOHNSON, ROBERT 1111111
1235 W STREET, N.E.
WASHINGTON, DC 200181211**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**C/D/CEO
Robert L. Johnson**

☒ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVPS
FRICKLAS, MICHAEL
1515 BROADWAY
NEW YORK, NY 10036**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVPT
FREEDLINE, ROBERT G
1515 BROADWAY
NEW YORK, NY 10036**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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: Jane R. Fuerst, Asst. secy. 3/22/04 212 258-6847

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #