2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCL	JMĚI	NT #

F01000001870



FILED 1. Entity Name SFX TOUR I (USA), INC. 03 JAN 27 PH 4: 38 SECRETARY OF STATE Mailing Address Principal Place of Business C/O SFX ENTERTAINMENT. INC. TALLAHASSEE, FLORES C/O SFX ENTERTAINMENT. INC. 220 WEST 42ND STREET 220 WEST 42ND STREET **NEW YORK NY 10036 NEW YORK NY 10036** 3. Mailing Address 2. Principal Place of Business ☐ CHECK HERE IF MAKING CHANGES Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 52-2279181 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Country Zip Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301 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. I am familiar with, and accept the obligations of registered agent. SIGNATURÉ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. \$5.00 May Be FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing Added to Fees Trust Fund Contribution. After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS EVP, Gen'l Counsel & Secy. ☐ Change TITLE ☐ Delete TITLE **DCEO** Dale A. Head NAME **BECKER, BRIAN** NAME 2000 West Loop South STREET ADDRESS 220 WEST 42ND STREET, 20TH FLOOR STREET ADDRESS CITY-ST-7IP Houston; TX 77027 NEW YORK NY 10036 CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE CD NAME MAYS, L. LOWRY NAME STREET ADDRESS 200 EAST BASSE ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN ANTONIO <u>TX 78209</u> Addition ☐ Change TITLE ☐ Defete TITLE NAME MAYS, MARK P NAME STREET ADDRESS STREET ADDRESS 200 EAST BASSE ROAD CITY-ST-ZIE CITY-ST-ZIP SAN ANTONIO TX 78209 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME 60016 60016 NAME MAYS, RANDALL T STREET ADDRESS STREET ADDRESS 200 EAST BASSE ROAD CITY-ST-ZIP CITY-ST-ZIP SAN ANTONIO TX 78209 Change ☐ Addition TITLE Delete TITLE NAME NAME wyker, ken STREET ADDRESS 200 EAST BASSE ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN ANTONIO TX 78209 [7] Change ☐ Addition TITLE ☐ Defete TITLE NAME HILL. JULIANA F NAME STREET ADDRESS 200 EAST BASSE ROAD STREET ADDRESS CITY-ST-ZIP

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 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. Dale A. Head-EVP Gen 1 Counsel Jan. 21, 2003 & Secretary

SIGNATURE:

CITY-ST-ZIP

SAN ANTONIO TX 78209

Date

Daytime Phone #

CR2E034 (10/02)





ACCOUNT NO. : 072100000032

REFERENCE : 906985 4375356

AUTHORIZATION :

COST LIMIT :

ORDER DATE : January 24, 2003

ORDER TIME : 11:09 AM

ORDER NO. : 906985-070

CUSTOMER NO: 4375356

CUSTOMER: Ms. Christina V. Lynge

Sfx Entertainment Inc. 220 West 42nd Street

New York, NY 10036

ANNUAL REPORT FILING

NAME: SFX TOUR I (USA), INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull - Ext. 1115

EXAMINER'S INITIALS: ____