2004 FOR PROFIT CORPORATION

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Jan 26, 2004 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # F03000000959** 01-26-2004 90053 050 ***150 00 PRN HOLDING (USA), INC. Principal Place of Business Mailing Address 1201 NORTH ORANGE STREET, SUITE 781 1201 NORTH ORANGE STREET, SUITE 781 WILMINGTON, DE 19801 WILMINGTON, DE 19801 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01082004 Chg-P CR2E034 (10/03) City & State Applied For City & State 4. FEI Number 51-0379139 Not Applicable $_{\rm Zip}$ Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City 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 reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. VD Change Addition | ☐ Delete TITLE BROOKS, PETER NAME NAME STREET ADDRESS 810 7TH AVENUE STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10019 CITY-ST-ZIP AVSD Delete TITLE ☐ Change ☐ Addition FOWLER, ANNMARIE NAME NAME STREET ADDRESS 810 7TH AVENUE STREET ADDRESS CITY-ST-ZIP NEW YORK; NY 10019 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition IMBROSCIANO, MATTHEW NAME NAME STREET ADDRESS 810 7TH AVENUE STREET ADDRESS NEW YORK, NY 10019 CITY-ST-7IP CITY-ST-7IP **VP** Taxation **☒** Delete TITLE RUSSAKCIANO, MICHAEL A JR NAME MARKE Russak, Michael A. Jr. STREET ADDRESS 810 7TH AVENUE STREET ADDRESS 810 7th Ave New York, NY CITY-ST-ZIP NEW YORK, NY 10019 CITY-ST-ZIP 10019 TITLE Delete TITLE ☐ Change Addition President MORIN, CHARLIE NAME NAME Gregson, Charles STREET ADDRESS 810 7TH AVENUE STREET ADDRESS 810 7th Ave NEW YORK, NY 10019 CITY-ST-ZIP CITY-ST-ZIP New York, NY ☐ Change Addition TITLE Delete TITLE MOZARSKY, SCOTT NAME STREET ADDRESS 810 7TH AVENUE STREET ADDRESS

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12. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

NEW YORK, NY 10019

SIGNATURE: _	Annmarie Fowler	AVP & Secretary		
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #