

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 18, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # F03000000959

1. Entity Name  
PRN HOLDING (USA), INC.



Principal Place of Business  
1201 NORTH ORANGE STREET, SUITE 781  
WILMINGTON, DE 19801

Mailing Address  
1201 NORTH ORANGE STREET, SUITE 781  
WILMINGTON, DE 19801



01102005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
51-0379139

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

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

**DO NOT WRITE  
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

TITLE	VD
NAME	BROOKS, PETER
STREET ADDRESS	810 7TH AVENUE
CITY - ST - ZIP	NEW YORK, NY 10019
TITLE	AVSD
NAME	FOWLER, ANNMARIE
STREET ADDRESS	810 7TH AVENUE
CITY - ST - ZIP	NEW YORK, NY 10019
TITLE	VD
NAME	IMBROSCIANO, MATTHEW
STREET ADDRESS	810 7TH AVENUE
CITY - ST - ZIP	NEW YORK, NY 10019
TITLE	VP
NAME	RUSSAK, MICHAEL A JR
STREET ADDRESS	810 7TH AVENUE
CITY - ST - ZIP	NEW YORK, NY 10019
TITLE	P
NAME	GREGSON, CHARLES
STREET ADDRESS	810 7TH AVENUE
CITY - ST - ZIP	NEW YORK, NY 10019
TITLE	V
NAME	MOZARSKY, SCOTT
STREET ADDRESS	810 7TH AVENUE
CITY - ST - ZIP	NEW YORK, NY 10019

UNU000234542  
02/18/05-80025-012 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/05  
Date

212 782 2921  
Daytime Phone #