

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 02, 2004 8:00 am
Secretary of State

03-02-2004 90038 040 ***150.00

DOCUMENT # F03000005806

1. Entity Name

PUBLIC COMMUNICATIONS SERVICES, INC.



Principal Place of Business

11859 WILSHIRE BLVD, STE 600
LOS ANGELES CA 90025

Mailing Address

11859 WILSHIRE BLVD, STE 600
LOS ANGELES CA 90025

94023711



MOORE CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

95-4615444

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
526 E PARK AVE
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE CDPS ☐ Delete
NAME JENNINGS, PAUL S
STREET ADDRESS 11859 WILSHIRE BLVD, STE 600
CITY-ST-ZIP LOS ANGELES CA 90025

TITLE VCD ☐ Delete
NAME FRYZER, JOSEPH
STREET ADDRESS 11859 WILSHIRE BLVD, STE 600
CITY-ST-ZIP LOS ANGELES CA 90025

TITLE VP ☒ Delete
NAME FRYZER, JOSEPH
STREET ADDRESS 11859 WILSHIRE BLVD, STE 600
CITY-ST-ZIP LOS ANGELES CA 90025

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE ☐ Change ☒ Addition
NAME ~~CHARLES~~ FREEDMAN, CHARLES B.
STREET ADDRESS 11859 WILSHIRE BLVD, SUITE 600
CITY-ST-ZIP LOS ANGELES, CA 90025

TITLE ☐ Change ☒ Addition
NAME ✓ JOE, TONNIE
STREET ADDRESS 11859 WILSHIRE BLVD, SUITE 600
CITY-ST-ZIP LOS ANGELES, CA 90025

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-19-04 310955411