


2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F03000005946 1. Entity Name DISCUS HOLDINGS, INC.						FILED 05 JAN - 3 PM 1:16 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 8550 HIGUERA STREET CULVER CITY, CA 90232				Mailing Address 8550 HIGUERA STREET CULVER CITY, CA 90232			
2. Principal Place of Business Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number 47-0907334				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent PARACORP INCORPORATED 236 EAST 6TH AVENUE TALLAHASSEE, FL 32303				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: <u>Denise Zollner</u> Denise Zollner, Asst. Secretary 12/30/2004 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>							
FILE NOW!!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.00				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HAYMAN, ROBERT <input type="checkbox"/> Delete 8550 HIGUERA STREET CULVER CITY, CA 90232			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 500043537155 12/20/04--01070--006 **150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROSENBLUM, KEN <input type="checkbox"/> Delete 8550 HIGUERA STREET CULVER CITY, CA 90232			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SETHY, VINEY <input type="checkbox"/> Delete 8550 HIGUERA STREET CULVER CITY, CA 90232			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition SALLY KAUTSON 8550 HIGUERA STREET CULVER CITY, CA 90232		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DORFMAN, WILLIAM <input type="checkbox"/> Delete 8550 HIGUERA STREET CULVER CITY, CA 90232			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				KEN ROSENBLUM CEO 310845-8257 <small>Date Days/Time Phone #</small>			