

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**


FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90400 003 ***150.00

001100 AV

DOCUMENT # F94000005856

1. Entity Name
VIACOM INC.



Principal Place of Business
**1515 BROADWAY
NEW YORK NY 10036**

Mailing Address
**% MICHAEL D. FRICKLAS
1515 BROADWAY
NEW YORK NY 10036**



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 **04-2949533**

Applied For
 Not Applicable

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

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES STREET, SUITE 105
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 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 NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete D REDSTONE, SUMNER M 1515 BROADWAY NEW YORK NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete DPCO KARMAZIN, MEL A 1515 BROADWAY NEW YORK NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete AS ROSENLEY, CATHERINE B 1515 BROADWAY NEW YORK NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete EVPS FRICKLAS, MICHAEL D 1515 BROADWAY NEW YORK NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete SCVD BRESSLER, RICHARD J 1515 BROADWAY NEW YORK NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition DIR/CH/CEO
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"/> Change <input checked="" type="checkbox"/> Addition AS Jane R. Fuerst 1515 Broadway New York, NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition SEVP/CFO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition SVP/TR Robert G. Freedline 1515 Broadway New York, NY 10036

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(b) 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 of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, changed, or on an attachment with an address, with all other like empowered.

Jane R. Fuerst, Assistant Secretary
212-258-6847 04/1/03

SIGNATURE: JANE R. FUERST
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)