

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000001535 (2)
1. Corporation Name
TICKETMASTER MERCHANDISING CORPORATION

Principal Place of Business 3701 WILSHIRE BLVD. 7TH FLOOR LOS ANGELES CA 90010	Mailing Address 3701 WILSHIRE BLVD. 7TH FLOOR LOS ANGELES CA 90010
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 8800 SUNSET BLVD. 27 Suite, Apt. #, etc. 28 6TH FLOOR 29 City & State 30 WEST HOLLYWOOD, CA 31 Zip 32 90069 33 Country		3. Date Incorporated or Qualified 03/30/1995		4. FEI Number 95-4290054 Applied For		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
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9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 110 N. MAGNOLIA ST. TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL			
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	CD	<input type="checkbox"/> DELETE	1.1 TITLE	PCD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	ROSEN, FREDRIC D		1.2 NAME	FREDRIC D. ROSEN			
STREET ADDRESS	3701 WILSHIRE BLVD.		1.3 STREET ADDRESS	8800 SUNSET BLVD., 7TH FLOOR			
CITY-ST-ZIP	LOS ANGELES CA		1.4 CITY-ST-ZIP	WEST HOLLYWOOD, CA 90069			
TITLE	D	<input type="checkbox"/> DELETE	2.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	LEONARD, BOB		2.2 NAME				
STREET ADDRESS	3701 WILSHIRE BLVD		2.3 STREET ADDRESS				
CITY-ST-ZIP	LOS ANGELES CA		2.4 CITY-ST-ZIP				
TITLE	VT	<input type="checkbox"/> DELETE	3.1 TITLE	VT	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	KNEPPER, PETER		3.2 NAME	PETER B. KNEPPER			
STREET ADDRESS	3701 WILSHIRE BLVD.		3.3 STREET ADDRESS	8800 SUNSET BLVD., 7TH FLOOR			
CITY-ST-ZIP	LOS ANGELES CA 90010		3.4 CITY-ST-ZIP	WEST HOLLYWOOD, CA 90069			
TITLE	VAS	<input type="checkbox"/> DELETE	4.1 TITLE	VAS	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	GOLDSTEIN, NED		4.2 NAME	NED GOLDSTEIN			
STREET ADDRESS	3701 WILSHIRE BLVD.		4.3 STREET ADDRESS	8800 SUNSET BLVD., 7TH FLOOR			
CITY-ST-ZIP	LOS ANGELES CA 90010		4.4 CITY-ST-ZIP	WEST HOLLYWOOD, CA 90069			
TITLE	S	<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	GANTZ, NORMAN J		5.2 NAME				
STREET ADDRESS	TWO N. LASALLE ST.		5.3 STREET ADDRESS				
CITY-ST-ZIP	CHICAGO IL 60602		5.4 CITY-ST-ZIP				
TITLE	AS	<input type="checkbox"/> DELETE	6.1 TITLE	AS	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	VON SZELUSKI, VICTORIA		6.2 NAME	VICTORIA RISHWAIN			
STREET ADDRESS	3701 WILSHIRE BLVD.		6.3 STREET ADDRESS	8800 SUNSET BLVD., 6TH FLOOR			
CITY-ST-ZIP	LOS ANGELES CA 90010		6.4 CITY-ST-ZIP	WEST HOLLYWOOD, CA 90069			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: 

4/17/98

310-360-6000

CR2E034 (10/97)