

Document Number Only

F95000001615

**C T CORPORATION SYSTEM**

Requestor's Name  
 1311 Executive Center Drive, Ste. 200  
 Address  
 Tallahassee, Fla. 32301 (904) 656-8298  
 City State Zip Phone

**CORPORATION(S) NAME**

800001449468  
 -04/06/95--01049--002  
 \*\*\*3361.00 \*\*\*3361.00

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 DIVISION OF CORPORATIONS  
 95 APR - 4 PM 11:13

Saturday Matinee Inc

800001449468  
 -04/06/95--01049--003  
 \*\*\*\*\*70.00 \*\*\*\*\*70.00

Profit  
 NonProfit

Foreign  
 Limited Partnership  
 Restatement  
 Certified Copy  
 Call When Ready  
 Walk In  
 Mail Out

Amendment  
 Dissolution/Withdrawal  
 Annual Report  
 Reservation  
 Photo Copies  
 Call if Problem  
 Will Wait

Merger  
 Mark  
 Other  
 Change of P.A.  
 Fictitious Name  
 CUS / G/S  
 After 4:30  
 Pick Up

Name  
 Availability  
 Document  
 Examiner  
 Updater  
 Verifier  
 Acknowledgment  
 W.P. Verifier

3:00  
4-4-95

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 PM 3:52  
 CORPORATION



**8. Officers:**

President: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

**10. Name and Street address of Florida registered agent:**

Name: CT CORPORATION SYSTEM

Office Address: c/o C T Corporation System, 1200 South Pine Island Road  
Plantation, Florida 33324  
Zip Code

**11. Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered agent's signature: \_\_\_\_\_

CT CORPORATION SYSTEM  
Ann Marie Cummins  
ANN MARIE CUMMINS (Officer)  
ASSISTANT SECRETARY  
(Type Name and Title of Officer)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

13. Paul A. Cardinal  
(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. Paul A Cardinal ASST SECRETARY AND GENERAL COUNSEL  
(Name and capacity of person signing application)

**SATURDAY MATINEE, INC.**

**EXECUTIVE OFFICERS** (as designated pursuant to applicable rules under the Securities Exchange Act of 1934)

Robert J. Higgins	President and Chief Executive Officer
Robert A. Helpert	Executive Vice President, Chief Administrative Officer and Chief Financial Officer
Edward W. Marshall, Jr.	Executive Vice President - Operations
John Whitehead	Senior Vice President - Merchandising

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**OFFICERS**

Matthew H. Mataraso	Secretary
John J. Sullivan	Vice President - Finance and Treasurer
Paul A. Cardinal	General Counsel and Assistant Secretary

**DIRECTORS**

Robert J. Higgins	Sole Director
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Because it is a public corporation, all of the officers list their address for business license applications as:

38 Corporate Circle  
Albany, New York 12203

\* \* \* \* \*

Applicant's primary business is the sale of blank and prerecorded home entertainment products, primarily video recordings and related products.

**State of New York**  
**Department of State** | **ss:**

I hereby certify, that the certificate of incorporation of SATURDAY  
MATINEE, INC. was filed on 06/25/1990, with perpetual duration, and that  
I have made a diligent examination of the index of corporation papers  
filed in this Department for a certificate, order, or record of a  
dissolution, and upon such examination, I find no such certificate, order  
or record, and that so far as indicated by the records of this  
Department, such corporation is a subsisting corporation.

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*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 22nd day of February  
one thousand nine hundred and  
ninety-five.*

*Alexander F. Trenchard*

*Secretary of State*

199502230053

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