

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 91339 043 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000002092

1. Entity Name

NEWSCOM SERVICES, INC.

Principal Place of Business

Mailing Address

00054158

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
202 W. 1st. Street

3. Mailing Address
202 W. 1st Street

Suite, Apt. #, etc.
5th Floor

Suite, Apt. #, etc.
5th Floor

City & State
Los Angeles, CA

City & State
Los Angeles, CA

4. FEI Number
65-0574817

Applied For
Not Applicable

Zip
90012

Country
USA

Zip
90012

Country
USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

The Prentice-Hall Corporation System, Inc.
1201 Hays Street
Tallahassee, FL 32301

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
D/P
Maryann Grau
STREET ADDRESS
202 W. 1st Street
CITY-ST-ZIP
Los Angeles, CA 90012 ☐ Delete

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

TITLE
NAME
D
James Helin
STREET ADDRESS
202 W. 1st Street
CITY-ST-ZIP
Los Angeles, CA 90012 ☒ Delete

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

TITLE
NAME
AS
Julie K. Xanders
STREET ADDRESS
202 W. 1st Street
CITY-ST-ZIP
Los Angeles, CA 90012 ☐ Delete

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

TITLE
NAME
AT
Debra A. Gastler
STREET ADDRESS
202 W. 1st Street
CITY-ST-ZIP
Los Angeles, CA 90012 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Debra A. Gastler

Debra A. Gastler

4/20/01

213-237-3743

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)