

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 FEB -6 AM 11:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

DOCUMENT # F96000003237 (2)

1. Corporation Name

SFX BROADCASTING, INC.

Principal Place of Business

150 EAST 58TH COURT, 19TH FLOOR
NEW YORK NY 10155

Mailing Address

150 EAST 58TH COURT, 19TH FLOOR
NEW YORK NY 10155

2. Principal Place of Business

21 650 Madison Avenue

Suite, Apt. #, etc.

22 City & State

23 New York, NY

Zip

24 10022

Country

2a. Mailing Address

26 650 Madison Avenue

Suite, Apt. #, etc.

27 City & State

28 New York, NY

Zip

29 10022

Country

30

3. Date Incorporated or Qualified

06/26/1996

4. FEI Number

13-3649750

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

900002423399--2

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD ☐ DELETE

NAME SILLERMAN, ROBERT X
STREET ADDRESS 150 EAST 58TH ST., 19TH FL
CITY-ST-ZIP NEW YORK NY

TITLE VTD ☐ DELETE

NAME ARMSTRONG, D G
STREET ADDRESS 150 EAST 58TH ST., 19TH FL
CITY-ST-ZIP NEW YORK NY

TITLE VD ☐ DELETE

NAME LIESE, RICHARD A
STREET ADDRESS 150 EAST 58TH ST., 19TH FL
CITY-ST-ZIP NEW YORK NY

TITLE SD ☐ DELETE

NAME TYTEL, HOWARD J
STREET ADDRESS 150 EAST 58TH ST., 19TH FL
CITY-ST-ZIP NEW YORK NY

TITLE VP ☐ DELETE

NAME BENSON, THOMAS
STREET ADDRESS 150 58TH STREET
CITY-ST-ZIP NEW YORK NY

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D. ☒ Change ☐ Addition

1.2 NAME Sillerman, Robert F.X
1.3 STREET ADDRESS 650 Madison Avenue
1.4 CITY-ST-ZIP New York, NY 10022

2.1 TITLE D. COO ☒ Change ☐ Addition

2.2 NAME Armstrong, D. Geoff
2.3 STREET ADDRESS 650 Madison Avenue
2.4 CITY-ST-ZIP New York, NY 10022

3.1 TITLE D. VP ☒ Change ☐ Addition

3.2 NAME Liese, Richard
3.3 STREET ADDRESS 650 Madison Avenue
3.4 CITY-ST-ZIP New York, NY 10022

4.1 TITLE D. VP ☒ Change ☐ Addition

4.2 NAME Tytel, Howard
4.3 STREET ADDRESS 650 Madison Avenue
4.4 CITY-ST-ZIP New York, NY 10022

5.1 TITLE D. VP ☒ Change ☐ Addition

5.2 NAME Benson, Thomas
5.3 STREET ADDRESS 650 Madison Avenue
5.4 CITY-ST-ZIP New York, NY 10022

6.1 TITLE D. Pres ☐ Change ☐ Addition

6.2 NAME Ferrari, Michael
6.3 STREET ADDRESS 650 Madison Avenue
6.4 CITY-ST-ZIP New York, NY 10022

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:

[Signature]

2/12/98 11:57 AM 2/12/98 11:57 AM

CR2E034 (10/97)

2



ACCOUNT NO. : 072100000032

REFERENCE : 691991 4375356

AUTHORIZATION : *Patricia Pizzuti*

COST LIMIT : \$ 150.00

ORDER DATE : February 3, 1998

ORDER TIME : 8:40 AM

ORDER NO. : 691991-020

CUSTOMER NO: 4375356

CUSTOMER: Mr. Michael Principe
Sfx Broadcasting, Inc.
650 Madison Avenue

New York, NY 10022

ANNUAL REPORT FILING

NAME: SFX BROADCASTING, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Theresa M Cooper

EXAMINER'S INITIALS:

RECEIVED
98FEB-6 AM 10:08
DIVISION OF CORPORATION