

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000004928

1. Entity Name

NEWS AMERICA DTH TECHCO INC.

FILED
Mar 14, 2000 8:00 am
Secretary of State

03-14-2000 90005 023 ***150.00

Principal Place of Business

Mailing Address

2121 AVENUE OF THE STARS
SUITE 2071
LOS ANGELES CA 90067

1300 N. MARKET STREET
SUITE 404
WILMINGTON DE 19801-1811
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

95-4599514

Applied For

Not Applicable

Zip

Country

Zip

Country

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, 2000 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 PD
NAME EVANS, DAVID
STREET ADDRESS 10201 WEST PICO BLVD
CITY-ST-ZIP LOS ANGELES CA ☐ Delete

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

TITLE ASAT
NAME LESLEY, COHEN R
STREET ADDRESS 1300 N. MARKET STREET #404
CITY-ST-ZIP WILMINGTON DE 19801 ☐ Delete

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

TITLE VS
NAME CONSTANTINE, JAN F
STREET ADDRESS 1211 AVE OF THE AMERICAS
CITY-ST-ZIP NEW YORK NY ☐ Delete

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

TITLE VAS
NAME DOODAN, MICHAEL
STREET ADDRESS 10201 WEST PICO BLVD
CITY-ST-ZIP LOS ANGELES CA ☐ Delete

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

TITLE CD
NAME CAREY, CHASE
STREET ADDRESS 10201 WEST PICO BLVD
CITY-ST-ZIP LOS ANGELES CA ☐ Delete

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

TITLE VD
NAME MURDOCH, K R
STREET ADDRESS 10201 WEST PICO BLVD
CITY-ST-ZIP LOS ANGELES CA ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)