2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 14, 2001 8:00 am Secretary of State DOCUMENT # F9600005872 1. Entity Name DMG WORLD MEDIA (USA) INC. 05-14-2001 90041 012 ***150.00 Principal Place of Business Mailing Address . -8400 BAY MEADOWS WAY 1 CONCORDE GATE SUITE 8 SUITE 800 JACKSONVILLE FL 32256 NORTH, ONTARIO, CANADA M3C -2N6 ИS OC 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0698336 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 City Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so: After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Addition TITLE ☐ Delete $CP \supset$ FRANKS, MICHAEL FRANKS, MICHAEL NAME 545 STH STEET STREET ADDRESS 545 5TH STREET E STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CA SONOMA CA 95476 ONOMA PD TITLE INNISBROOK CRESCENT Change NAME ALLEN, KENT R NAME 28 CASPER CRESCENT STREET ADDRESS STREET ADDRESS THORNHILL, ONTARIO 13T. 5A9 CITY-ST-ZIP BRAMPTON, ONTARIO, CANADA L6W -4N2 CITY-ST-ZIP TITLE Change ☐ Delete TITLE ALLINGHAM, J. PAUL NAME BARNES NAME NORTH VANCOUVER STREET ADDRESS 329 SHOREACRES ROAD STREET ADDRESS CITY-ST-ZIP BURLINGTON, ONTARIO, CANADA L7L -5T3 CITY-ST-ZIP istant Secretary DOI ENGROS CHARLES GAN, LEWIS & BOCKIUS, ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP NY☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP . CITY-ST-ZIP

SIGNATURE: AND TYPED OR PRINTED NAME OF SIGNIN Daytime Phone #

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.