## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # F9800001232 Apr 23, 2000 8:00 am Secretary of State COMCAST MH BUSINESS ONLINE COMMUNICATIONS, INC. 04-23-2000 90048 003 \*\*\*150.00 Principal Place of Business Mailing Address C/O COMAST CORPORATION C/O COMAST CORPORATION 1500 MARKET ST. 1500 MARKET ST. PHILADELPHIA PA 19102-2100 PHILADELPHIA PA 19102 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 23-2951866 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition PD □ Delete TITLE TITLE ROBERTS, BRIAN L NAME NAME STREET ADDRESS STREET ADDRESS 1500 MARKET ST. CITY-ST-ZIP CITY-ST-ZIP PHILADELPHIA PA 19102 ☐ Addition Change □ Delete TITLE NAME WANG, STANLEY STREET ADDRESS STREET ADDRESS 1500 MARKET ST. CITY-ST-ZIP CITY-ST-ZIP PHILADELPHIA PA 19102 ☐ Delete ☐ Change ■ Addition TITLE TITLE VΤ NAME ALCHIN, JOHN R NAME STREET ADDRESS STREET ADDRESS 1500 MARKET ST. CITY-ST-ZIP CITY-ST-ZIP PHILADELPHIA PA 19102 Change ☐ Addition Delete TITLE TITLE STDC NAME NAME BRODSKY, JULIAN A STREET ADDRESS STREET ADDRESS 1500 MARKET ST. CITY-ST-ZIP CITY-ST-ZIP PHILADELPHIA PA 19102 ☐ Change ☐ Addition Delete TITLE NAME NAME BACKSTROM, C. STEPHEN STREET ADDRESS STREET ADDRESS 1500 MARKET ST. CITY-ST-7IP CITY-ST-ZIP PHILADELPHIA PA 19102 Change Addition ☐ Delete TITLE TITLE

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.

CITY-ST-ZIP

NAME STREET ADDRESS

Changed, or on an attachment with an address, with an other like empowerer

SIGNATURE

NAME

STREET ADDRESS

1. 5 B. luto C. S

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

C. Stephen Backstrom

4/10/00

215-981-7557

Daytime Phone #