


2004 FOR PROFIT CORPORATION ANNUAL REPORT

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| DOCUMENT # F98000003416 1. Entity Name WESTFIELD CONCESSION MANAGEMENT, INC. |  |
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| Principal Place of Business 11601 WILSHIRE BLVD. 12TH FLOOR LOS ANGELES, CA 90025 | Mailing Address 11601 WILSHIRE BLVD. 12TH FLOOR LOS ANGELES, CA 90025 |
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DO NOT WRITE IN THIS SPACE



07142004 No Chg-P CR2E034 (10/03) *fa*

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| 4. FEI Number 95-4673300 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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. I am familiar with, and accept the obligations of registered agent.

000039641370

07/28/04--01036--021 **150.00

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD GREEN, RICHARD E 11601 WILSHIRE BLVD. 12TH FLOOR LOS ANGELES, CA 90025 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VD LOWY, PETER S 11601 WILSHIRE BLVD. 12TH FLOOR LOS ANGELES, CA 90025 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | T STEFANEK, MARK 11601 WILSHIRE BLVD. 12TH FLOOR LOS ANGELES, CA 90025 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | V VAZELAKIS, DIMITRI 11601 WILSHIRE BLVD. 12TH FLOOR LOS ANGELES, CA 90025 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | AS PACKER, RORY 11601 WILSHIRE BLVD. 12TH FLOOR LOS ANGELES, CA 90025 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | AS OLSON, KYLE 11601 WILSHIRE BLVD 12T-F2 LOS ANGELES, CA 70025 |

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kyle J. Olson* Kyle J. Olson 7-14-04 310-445-2421

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #