

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 04, 2004 8:00 am**  
**Secretary of State**

05-04-2004 90179 044 \*\*\*150.00



**DOCUMENT # F99000002024**  
 1. Entity Name  
**ABOVENET-COMMUNICATIONS, INC.**

CEI

Principal Place of Business Mailing Address  
**360 HAMILTON AVE WHITE PLAINS, NY 10601**      **360 HAMILTON AVE WHITE PLAINS, NY 10601**

**14020107**



2. Principal Place of Business Suite, Apt. #, etc.  
 3. Mailing Address Suite, Apt. #, etc.

04232004 Chg-P CR2E034 (10/03)

City & State Zip Country City & State Zip Country

4. FEI Number **13-3982836**  
 Applied For Not Applicable  
 5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE, FL 32301-2525**

7. Name and Address of New Registered Agent  
 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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CH.</b> <b>GARAFOLO, STEPHEN A</b> <input checked="" type="checkbox"/> Delete <b>360 HAMILTON AVE</b> <b>WHITE PLAINS, NY 10601</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CEO</b> <input checked="" type="checkbox"/> Delete <b>TANZI, NICHOLAS M</b> <b>360 HAMILTON AVE</b> <b>WHITE PLAINS, NY 10601</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CFO</b> <input checked="" type="checkbox"/> Delete <b>LAY, RANDALL</b> <b>360 HAMILTON AVE</b> <b>WHITE PLAINS, NY 10601</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVP</b> <input type="checkbox"/> Delete <b>SOKOTA, ROBERT J</b> <b>360 HAMILTON AVE</b> <b>WHITE PLAINS, NY 10601</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVP</b> <input checked="" type="checkbox"/> Delete <b>LAPERCH, WILLIAM G</b> <b>360 HAMILTON AVE</b> <b>WHITE PLAINS, NY 10601</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <input checked="" type="checkbox"/> Delete <b>JOFFE, STEVEN J</b> <b>360 HAMILTON AVE</b> <b>WHITE PLAINS, NY 10601</b>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Michael Embler</b> <b>360 Hamilton Avenue, 7th Floor</b> <b>White Plains, New York 10601</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P/D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>William G. LaPerch</b> <b>360 Hamilton Avenue, 7th Floor</b> <b>White Plains, New York 10601</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Michael Doris</b> <b>360 Hamilton Avenue, 7th Floor</b> <b>White Plains, New York 10601</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Dennis O'Connell</b> <b>360 Hamilton Avenue, 7th Floor</b> <b>White Plains, New York 10601</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>Please See Attached</b> <b>For Completed Listings</b>

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:** *[Signature]* **April 27, 2004** **(914) 421-6700**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachments

14020107

**ABOVENET COMMUNICATIONS, INC.**  
**F/K/A METROMEDIA FIBER NETWORK SERVICES, INC.**  
**FEIN # 13-3982836**  
**STATE OF FLORIDA**  
**DOCUMENT NO. F99000002024**

**2004 List of Directors / Officers**  
**Updated as of 03-30-2004**

<b>Director</b>	<b>Title</b>	<b>Office Address</b>
William G. LaPerch	Director	360 Hamilton Avenue, 7th Floor White Plains, NY 10601
Michael Emblar	Director	360 Hamilton Avenue, 7th Floor White Plains, NY 10601
Stuart Subotnick	Director	360 Hamilton Avenue, 7th Floor White Plains, NY 10601
Dennis O'Connell	Director	360 Hamilton Avenue, 7th Floor White Plains, NY 10601
Richard Postma	Director	360 Hamilton Avenue, 7th Floor White Plains, NY 10601
Richard Shorten	Director	360 Hamilton Avenue, 7th Floor White Plains, NY 10601
Jeffrey Brodsky	Director	360 Hamilton Avenue, 7th Floor White Plains, NY 10601

<b>Officer</b>	<b>Title</b>	<b>Office Address</b>
William G. LaPerch	President & CEO	360 Hamilton Avenue, 7th Floor White Plains, NY 10601
Michael Doris	Senior Vice President & CFO	360 Hamilton Avenue, 7th Floor White Plains, NY 10601
Robert J. Sokota	Senior VP - General Counsel & Secretary	360 Hamilton Avenue, 7th Floor White Plains, NY 10601