

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 12, 2002 8:00 am
Secretary of State

09-12-2002 90092 028 ***550.00

DOCUMENT # **F99000004982**

1. Entity Name

Freedom Starr Communications, Inc

DO NOT WRITE IN THIS SPACE

980255

2. Principal Place of Business

8730 Sunset Blvd.

3. Mailing Address

SAME

Suite, Apt. #, etc.

700

Suite, Apt. #, etc.

City & State

West Hollywood CA

City & State

4. FEI Number

33-0739131

Applied For

Not Applicable

Zip

90069

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

City

Tallahassee

FL

Zip Code

32301

**DO NOT WRITE
IN THIS SPACE**

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)

☒

**January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
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

TITLE	President / CEO
NAME	Gary H. Hickox
STREET ADDRESS	8730 Sunset Blvd. #700
CITY - ST - ZIP	West Hollywood CA 90069
TITLE	Treasurer / Secretary
NAME	Warren M. Billard
STREET ADDRESS	8730 Sunset Blvd. #700
CITY - ST - ZIP	West Hollywood CA 90069
TITLE	Chairman
NAME	Richard J. Gordon
STREET ADDRESS	8730 Sunset Blvd. #700
CITY - ST - ZIP	West Hollywood CA 90069
TITLE	
NAME	
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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like information.

SIGNATURE:

Gary H. Hickox

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gary Hickox

9-6-02

Date

310-734-3500

Daytime Phone #

CR2E034B (12/01)