

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H75052

1. Entity Name
THE BOX WORLDWIDE, INC.

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90205 048 ***150.00

Principal Place of Business
**9197 S PEORIA ST
ATTN LIBERTY TAX DEPT
ENGLEWOOD CO 80112
US**

Mailing Address
**PO BOX 5630
ATTN LIBERTY TAX DEPT
DENVER CO 80217
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-2605267		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
WLMC REGISTERED AGENTS, INC. 701 BRICKELL AVE SUITE 2000 MIAMI FL 33131				Name The Prentice-Hall Corporation System, Inc.			
				Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street			
				City Tallahassee			
				FL Zip Code 32301			

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 *Kurt Plender* **Kurt Plender Asst. Vice-Pres.**
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) <input checked="" type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCGALDE, ALAN 1221 COLLINS AVE MIAMI BCH FL 33139 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/CEO/D Lee Masters 9197 S Peoria Street Englewood, CO 80112 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO HOFFMAN, LUANN M 1221 COLLINS AVE MIAMI BEACH FL 33139 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP/S/T Mark Rozells 9197 S Peoria Street Englewood, CO 80112 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOFF, DAVID B 1221 COLLINS AVE MIAMI BEACH FL 33139 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP SARTAIN, PAUL 1221 COLLINS AVE MIAMI BCH FL 33139 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Gary Blaylock 9197 S Peoria Street Englewood, CO 80112 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENNETT, ROBERT R 1221 COLLINS AVE MIAMI BEACH FL 33139 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FISHER, DONNE F 1221 COLLINS AVE MIAMI BEACH FL 33139 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/S Charles Tanabe 9197 S Peoria Street Englewood, CO 80112 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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.

SIGNATURE: *Gary Blaylock* **Gary Blaylock/Vice President** **4/23/01** **720-875-5400**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)