

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 92177 014 *****55.00

DOCUMENT # M98000000384

1. Entity Name

SCIE LLC



Principal Place of Business

**2835 NORTH NAOMI STREET
BURBANK CA 91504**

Mailing Address

**C/O LAW OFFICES OF JAMES DONOVAN
515 S. FIGUEROA STREET, SUITE 1000
LOS ANGELES CA 90071-3327**

2. Principal Place of Business

3. Mailing Address

C/O BEN-ZVI AND BECK

Suite, Apt. #, etc.

Suite, Apt. #, etc.

611 W. SIXTH STREET, #2620

City & State

**City & State
LOS ANGELES, CA**

Zip

Country

**Zip
90017**

**Country
U.S.A.**

4. FEI Number **88-0391100**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$5.00 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☐ Delete
NAME **DRANEY, ROBERT W**
STREET ADDRESS **410 NEVADA HIGHWAY, SUITE 200**
CITY-ST-ZIP **BOULDER CITY NV 89005**

TITLE **MGR** ☐ Delete
NAME **PETERSON, JACK L**
STREET ADDRESS **410 NEVADA HIGHWAY, SUITE 200**
CITY-ST-ZIP **BOULDER CITY NV 89005**

TITLE **MGR** ☒ Delete
NAME **DONOVAN, JAMES M**
STREET ADDRESS **515 SOUTH FIGUEROA ST., STE. 1000**
CITY-ST-ZIP **LOS ANGELES CA 90071**

TITLE **MEM** ☐ Delete
NAME **WRLJ MAPLE CORP.**
STREET ADDRESS **2835 NORTH NAOMI STREET**
CITY-ST-ZIP **BURBANK CA 91504**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☒ Addition
NAME **MGR**
STREET ADDRESS **FABRICK, HOWARD D.**
CITY-ST-ZIP **2029 CENTURY PARK EAST, SUITE 2600
LOS ANGELES, CA 90067**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]* **Peterson, Manager** **4/2/2003** **213-488-0240**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (10/02)