## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUI	MENT # <b>M99342</b>	7				FILED				
PTG-FLORIDA, INC.		April 1980				00 FEB 18	8: MA	48	•	
D		MA-III.				SECRETARY OF STATE TARLAMASSEE, FLORIDA				
Principal Place of Business  100 S. BISCAYNE BLVD.  SUITE 1200  MIAMI FL 33133-2095		Mailing Address  100 S. BISCAYNE BLVD. SUITE 1200 MIAMI FL 33131-2029					II <b>Sis</b> et <b>S</b> iset S	1811 <b>4</b> 1811 <b>818</b> 1	1 <b>61611 188</b> 1	
2. Principal Place of Business		3. Mailing Address 650 Hadison Avenue								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State		City & State New York, NY			<b>4.</b> F	58-1812340	-	_ <del>                                    </del>	plied For t Applicable	
Zip	Country	Zip 10027	Count	ry .S. A .	<b>5.</b> C	Certificate of Status Desired	<b>メ \$</b>	8.75 Add	itional	
	6. Name and Address of Current F	Registered Agent			7. N	lame and Address of New Reg	istered Ag	ent		
				Name						
CORPORATION SERVICE COMPANY 1201 HAYS STREET			•	Street Address (P.O. Box Number is Not Acceptable)						
TALL	AHASSEE FL 32301									
				City			FL	Zip Code	•	
SIGNATURE .	named entity submits this statement for Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE: I	Registered	Agent signature re			DATE	.,,		
Tax filing r	oration is eligible to satisfy its Intangible equirement and elects to do so. ira on back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of St				10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. □ Added to Fees				
11.	OFFICERS AND [	DIRECTORS	12.	T	AD	DITIONS/CHANGES TO OFFICE	ERS AND D	IRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZEIGER, SCOTT 2000 WEST LOOP SOUTH HOUSTON TX 77027	☐ Delete	1				[	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C MILES WILKIN 2000 WEST LOOP SOUTH HOUSTON TX 77027	☐ Delete		<b>I</b>			[	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BECKER, ALLEN J. 2000 WEST LOOP SOUTH HOUSTON TX 77027	☐ Delete	TITLE NAME STREE				]	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GAMBLE, GREG 2000 WEST LOOP SOUTH HOUSTON TX 77027	☐ Delete						_ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LEWIS, JEFFRY B 2000 WEST LOOP SOUTH HOUSTON TX 77027	□ Delete						Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BECKER, BRIAN 2000 WEST LOOP SOUTH HOUSTON TX 77027	☐ Delete	CITY-	ET ADDRESS ST-ZIP	in Costina	2000031	<u> 39</u> 3	<b>7</b> -278	Addition	
indicated	certify that the information supplied with on this report or supplemental report is	true and accurate and that my	ne exer ⁄ sianat	ure shall have	the same I	legal effect as if made under oat	h; that I am	an officer	or director	

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:



2/20/00

(212)838-3100

Daytime Phor

PYG-FLORIDA, INC.
ADDITIONAL OFFICERS & DIRECTORS

## **OFFICERS**

Thomas P. Benson - Vice President & CFO

John Coughlan - Vice President Debbie Goldman-Levi - Assistant Secretary

Richard A. Liese - Senior Vice President & Assistant Secretary

Peter A. Strauss - Vice President

Howard J. Tytel - Executive Vice President

## **DIRECTORS**

Robert F. X. Sillerman Howard J. Tytel Michael G. Ferrel

All addresses are: 650 Madison Avenue, 16th Floor, New York, NY 10022



ACCOUNT NO. : 072100000032

REFERENCE :

AUTHORIZATION :

COST LIMIT : \$ 150.00

ORDER DATE: February 17, 2000

ORDER TIME : 9:32 AM

ORDER NO. : 593298-010

CUSTOMER NO: 4375356

CUSTOMER: Ms. May Hung Lee

Sfx Entertainment, Inc.

650 Madison Avenue

16th Floor

New York, NY 10022

## ANNUAL REPORT FILING

NAME: PTG-FLORIDA, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY \_\_ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Evika Carlson

EXAMINER'S INITIALS:

