2002 UNIFORM BUSINESS REPORT (UBR)

| DOCUMENT # P01000106958 1. Entity Name FOX ENTERTAINMENT, INC. | | | | | Jan 30, 2002 8:00 am Secretary of State 01-30-2002 90031 040 ***150.00 | | |
|--|--|--|---|---|---|---|--|
| Principal Place of Business 713 EAST ATLANTIC BLVD POMPANO BEACH FL 33060 Mailing Address 713 EAST ATLANTIC BLVD POMPANO BEACH FL 33060 | | | | | # 140 (144 H 40 H 40 H H H 40 H H H 40 H H H 40 H H H H | I 1612 1326 1316 1316 1410 1610 | 8 8 12 16 |
| 2. Principal Place of Business 2400 NE 10+11 Court Suite, Apt. #, etc. # 6 | | | oth Court | | DO NOT WRITE IN THIS SPACE | | |
| Pompo Zip | Country Country | Pompano Blach, FL Zip Country | | | FEI Number 105 - 115 (6 (5 | \$8.75 Ad | pplied For ot Applicable |
| 330 | 6. Name and Address of Current Re | 33062 egistered Agent | USA | | Certificate of Status Desired Name and Address of New Ro | Fee Rêquire | |
| FOX, MICHAEL 713 EAST ATLANTIC BLVD POMPANO BEACH FL 33060 | | | 740 | Street Address (P.O. Box Number is Not Acceptable) 2400 NE JOHN COURT # 6 CityPompano Beach FL Zip Code 32060 | | | |
| 8. The above | named entity submits this statement for the stat | | gistered office or | registered ag | ent, or both, in the State of Flo | | |
| Tax filing requirement and elects to do so After M. | | After May 1, 2002 | W!!! FEE IS \$150.00 2002 Fee will be \$550.00 yable to Department of State | | 10. Election Campaign Finance Trust Fund Contribution | | 00 May Be d to Fees |
| STREET ADDRESS | OFFICERS AND DI D FOX, MICHAEL 713 EAST ATLANTIC BLVD POMPANO BEACH FL 33060 | RECTORS Delete | 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | 2400 1 Pompo | | Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | - | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | , , , , , , | <i>310 31 31 31 31 31 31 31 31</i> | ☐ Change | ☐ Addition |
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| 13. I hereby of indicated of the corchanged, | certify that the information supplied with the on this report or supplemental report is traporation or the receiver of rusting empower or on an attachment with an actions, with | is filing does not qualify for the ue and accurate and that my s ered to execute this report as r h all other like empowered. | e exemption stat signature shall have required by Cha | ed in Section ave the same pter 607, Flori | 119.07(3)(i), Florida Statutes. I legal effect as if made under o da Statutes; and that my name | further certify that the in ath; that I am an officer appears in Block 11 o | nformation or director r Block 12 if |

SIGNATURE:

SAMATURE REQUIRED

01-11.02

Daytime Pho.