2007 FOR PROFIT CORPORATION

FILED Apr 17, 2007 8:00 am Secretary of State

04-17-2007 90246 017 ***150.00

ANNUAL REPORT	
DOCUMENT # P09978 1. Entity Name HOME SHOPPING NETWORK, INC.	

40065984 Principal Place of Business Mailing Address **152 W. 57TH STREET** 1 HSN DRIVE NEW YORK, NY 10019 ST PETERSBURG, FL 33729 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01122007 CR2E034 (12/06) 4. FEI Number Applied For City & State City & State 59-2649518 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 City 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 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. DEVP TITLE ☐ Delete TITLE Chief Exec. Officer MCINERNEY, THOMAS J NAME NAME Mindy Grossman STREET ADDRESS 152 WEST 57TH STREET STREET ADDRESS HSN Drive Petersburg, FL 33729 CITY-ST-71P CITY-ST-ZIP NEW YORK, NY 10019 Delete TITLE Change M Addition TITLE JAMES DEN ARMSTRONG, STEVE NAME NAME 1 HSN DRIVE STREET ADDRESS STREET ADDRESS CITY+ST-ZIP ST. PETERSBURG, FL 33729 CITY-ST-ZIP VPSD ☐ Delete TITLE TITLE **BLATT, GREGG** NAME NAME STREET ADDRESS STREET ADDRESS 152 WEST 57 STREET NEW YORK, NY 10019 CITY - ST - ZIP CITY ST-23P TITLE AS ☐ Delete ☐ Change ☐ Addition MOSSER, MICHAEL NAME NAME STREET ADDRESS 1 HSN DRIVE STREET ADDRESS CITY-ST-ZIP ST PETESBURG, FL 33729 CITY - ST - 7iP VPT ☐ Change ☐ Addition TOTLE ☐ Delete TITLE NAME SCHMELING, JUDY STREET ADDRESS 1 HSN DR. STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33729 CITY-ST-ZIP Change ☐ Addition TITLE Delete Delete TITLE MILAM, DENNIS NAME NAME STREET ADDRESS STREET ADDRESS 1 HSN DR. CITY - ST - ZIP SAINT PETERSBURG, FL 33729 CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 cath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURES

THE AND TYPED OR PRONTED NAME OF EXAMINE OFFICER OR DIRECTOR