2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13724

FILED Jan 30, 2009 Secretary of State

Entity Name: METRO NETWORKS COMMUNICATIONS, INC.

Current Pi	rincipal Place	of Business	New Princ	ipal Place of Busi	nacc.
	-	oi Busilicss.	146AA LIIIIG	npai i lace di Busil	11633.
5TH FLOO					
NEW YOR	K, NY 10019	US			
Current M	ailing Address	s:	New Maili	ng Address:	
5TH FLOO	57TH STREET R K, NY 10019	US			
FEI Number:	52-1124973	FEI Number Applied For ()	FEI Number Not Appl	licable () Certi	ficate of Status Desired ()
Name and	Address of Ci	urrent Registered Agent:	Name and	Address of New R	Reaistered Agent:
	ATION SERVIC			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	g
1201 HAYS	STREET				
TALLAHAS	SSEE, FL 3230	12525 US			
	named entity so of Florida.	ubmits this statement for the pu	rpose of changing i	ts registered office o	or registered agent, or both,
SIGNATUF	RE:				
	Electroni	c Signature of Registered Agen	t		Date
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS	S AND DIRECT	ORS:	ADDITION	IS/CHANGES TO C	FFICERS AND DIRECTOR
Γitle:	PCEO ()	Delete	Title:	PRES (X) Chang	ge () Addition
Name: Nddress:	BEUSSE, THOM	AS EET,5TH FLOOR	Name: Address:	SHERWOOD, ROD 40 W 57TH STREET,5	STH ELOOR
City-St-Zip:	NEW YORK, NY	*	City-St-Zip:	,	
Γitle:	CAO ()	Delete	Title:	() Chang	ge () Addition
Name:	HILLMAN, DAVID		Name:		
\ddress: City-St-Zip:	NEW YORK, NY	EET, 5TH FLOOR 10019	Address: City-St-Zip:		
Title:	CFO ()	Delete	Title:	() Chan	ge () Addition
lame:	SHERWOOD, RO	OD	Name:	()	3- ()
Address:		STREET, 5TH FLOOR	Address:		
City-St-Zip:	NEW YORK, NY	10019	City-St-Zip:		
Γitle: Name:	()	Delete	Title: Name:	COO () Chang KALIN, STEVEN	ge (X) Addition
\ddress:			Address:	40 WEST 57TH STRE	-
City-St-Zip:			City-St-Zip:	NEW YORK, NY 1001	19
Γitle:	()	Delete	Title:		ge (X) Addition
√ame: √ddress:			Name: Address:	HERSAM, ANDREW 40 WEST 57TH STRE	ET STHELOOP
nduress. City-St-Zip:			City-St-Zip:	NEW YORK, NY 100°	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE:	DAVID HILLMAN	CAO	01/30/2009