


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 02, 2004 08:00 AM
Secretary of State

DOCUMENT # P13823	
1. Entity Name BLAIR TELEVISION INC.	

Principal Place of Business 3 EAST 54TH STREET NEW YORK, NY 10022	Mailing Address 3 EAST 54TH STREET NEW YORK, NY 10022
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DO NOT WRITE IN THIS SPACE	
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07212004 No Chg-P CR2E034 (10/03)

4. FEI Number 13-3397121	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYES STREET TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent Signature required when reissuing) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO MACCOURTNEY, LEO 3 EAST 54TH STREET NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BERLIN, STEVE 3 EAST 54TH STREET NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCAULIFF, TIMOTHY 3 EAST 54TH STREET NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:  **WILSON LEMON JR.** 2/20/04 212 230-5702
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #