FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name

DOCUMENT # P18365



FLORIDA DEPARTMENT OF STATE

Katherine Harris

DIVISION OF CORPORATIONS

May 10, 1999 8:00 am Secretary of State Secretary of State

05-10-1999 90131 015 ***150.00

| USA STATION GROUP OF FLORIDA, INC. | | | | | | | | |
|---|----------------------------|-----------------|----------------------|---------------------------------|--|---|----------------|----------------|
| Dringing Diogr | of Puninger | Mailing Address | | | ! 10#110#1 10# 110#1 1010# 1110# 1111# #FF | KAT BINI BIRUH BIRIN | OLDIN ENDIN OF | OLY BYCKI (OO) |
| | | | T | ľ | | | | |
| 4450-L ENTERPRISE COURT 4450-L ENTERPRISE COURT MELBOURNE FL 32934 SUITE 100 | | | , | | | | | |
| US MELBOURNE FL 32934 | | | | | DO NOT WRITE IN THIS SPACE | | | |
| 1 | | US | | | 3. Date Incorporated or Qualifed | | | |
| | | | | | 03/09/1988 | | | |
| Principal Place of Business 2a. Mailing Address | | | 7 -1 | | 4, FEI Number | | App | lied For |
| 21 26 IS2 W. 57! | | <u> </u> | | 59-2876925 | | | Applicable | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | 5. Certifcate of Status Desired | | \$8.75 A | | |
| ▝▀▘▗▃▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗▗ | | | | | | | Fee Req | juired |
| City & State City & State | | | | 6. Election Campaign Financing | | \$5.00 N | | |
| 23 | | 28 New York | | | Trust Fund Contribution | | Added to | Fees |
| Zip | Country | Zip | Country | | 8. This corporation owes the curre | | | 7.u. |
| 24 | 25 | 29 10019 | 30 US A | | Personal Property Tax. | | | □No |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent | | | | | | | | |
| CT COROCRATION SYSTEM | | | | | | | | |
| CT CORPORATION SYSTEM | | | | Street Addres | ss (P.O. Box Number is Not Accepta | ble) | | |
| 1200 SOUTH PINE ISLAND ROAD | | | | | | | | |
| PLANTATION FL 33324 | | | 83 | | | | | , |
| | | | 84 (| City | | | 85 Zip C | ode |
| | | | | • | | FL | | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered | | | | | | | | |
| office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nevel by accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | | | |
| 12. | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OF | FICERS AND | DIRECTOR | RS IN 12 |
| TITLE | CSD | DELETE | 1,1 TITLE | | 5D | | Change | Addition |
| NAME | OXENDINE, JOHN | | 1.2 NAME | Ge | nachowski, Julius 2 W. 5712 St., 47 | ٠ <u>. </u> | | |
| STREET ADDRESS | 1211 CONNECTICUT AVE, NW, | SUITE 509 | 1.3 STREET AD | DRESS 15 | 2 W 5715 St. 42 | zned F1. | | |
| CITY-ST-ZIP | WASHINGTON D | · · · · · · | 1.4 CITY-ST-Z | P N. | en York, NY 1001 | 9 | | |
| TITLE | PTD | DELETE | 2.1 TITLE | Pi | | | Change | Addition |
| NAME | PARKER, ED | | 2.2 NAME | | iller, Jonathan | | | |
| STREET ADDRESS | 1211 CONNECTICUT AVEN, NW | / SUITE 509 | 2,3 STREET AD | DRESS IC. | 2 W. 574 St. 429 | API. | | ì |
| CITY-ST-ZIP | WASHINGTON D | /, 00.112 000 | 2.4 CITY-ST-Z | | EW YOIK, NY 1001 | 9 | | |
| TITLE | D | (L) DELETE | 3.1 TITLE | 111 | | | Change | Addition |
| NAME | WILLIAMS, WESLEY | _ | 3.2 NAME | , v - | nzak, Doug | | | |
| (| 1211 CONNECTICUT AVE., NW. | SHITE 509 | 3.3 STREET AD | DRESS & | op w. Survet Blue | ₫. | | |
| STREET ADDRESS | WASHINGTON D | , JUIL 000 | 3.4. CITY-ST-Z | | . Hollywood, (A | 70069 | | , |
| CITY-ST-ZIP | WASHINGTON D | ☐ DELETE | 4.1 TITLE | <u>"-+</u> | 1.01.5 | ,,,,, | Change | Addition |
| | | | 4 2 NAME | Q 1 | rachero Helen | _ | | |
| NAME | | | 4.3 STREET AC | DOESE CE | senberg. Helen vo | | | ì |
| STREET ADDRESS | | | | DIVESS DO | Hollywood, CA 90 | 069 | | |
| CITY-ST-ZIP | | ☐ DELETE | 4.4 CTTY-ST-Z | | | - |] Change | Addition |
| TITLE | | | 5.1 MILE 5.2 NAME | 145 | SILZ AND O IL SLOVE | | | |
| NAME | | | 5.3 STREET AC | INRESS HTC | oltzman, H. Steve | 411 | | |
| STREET ADDRESS | | | 5.4 CITY-ST-Z | 10 | . Petersburg, FL | 3372 | 7 | } |
| CHY-ST-ZIP | | (Delete | 6.1 TITLE | <u>" 31</u> | reskisowy, 1 4 | |] Change | Addition |
| TITLE | | ☐ DELETE | 62 NAME | A | | L | _1 Change | E |
| NAME | | | 6.3 STREET AC | DRESS L LL | ovgan, ken | | | |
| | 1 | | ■ 0.3 STINEE I PAL | AUTHOR IN IN | | | | , |

14. 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 annual report or supplemental annual report is true and accurate and that rry 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 12 or Block 13 if changed, or en an attachment with an address, with all other like empowered. CITY-ST-ZIP

SIGNATURE:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR TURE AND TYPED OR PRINTED

V Bolter, Howard 8800 West Sunset Blvd. West Hollywood, CA 90069 P18365 5323479613115

V Willis, Sylvia 4450-L Enterprise Court Melbourne, FL 32934

AT Durney, Michael 152 West 57th Street, 42nd Floor New York, NY 10019

AT Swartz, Jeff 8800 West Sunset Blvd. West Hollywood, CA 90069

AT Morgan, Ken 8800 West Sunset Blvd. West Hollywood, CA 90069