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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

| | KING | WORLD. | PRODUCTIONS | INC. |
|--|------|--------|--------------------|------|
|--|------|--------|--------------------|------|

| Principal Place of Business Mailing Address | | | | | L INBAHDEL MAN FIDIN MEHA ARANG MEN | i Bilai Bedil Beber arası albik Beber aldır iddi |
|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|----------------------|--------------------------------------------------------------|---------------------------------------------------------------------------------------|----------------------------------------------------------------------------|
| 1700 BROAD 35TH FLOOR NEW YORK I | 1 | 830 MORRIS TURNPIN SHORT HILLS NJ 070 US | | | | |
| US | | | • | | 3. Date Incorporated or Qualified 02/09/1989 | 3a. Date of Last Report 07/11/1995 |
| 2. Principal Place of Business 2a | | 2a. Mailing Address | | | 4. FEI Number | Applied For |
| 21 | | 26 | | | 13-2565808 | Not Applicable |
| Suité, Apt. # | a, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| Oily & State | | City & State | | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | Country | Zip | Coun | try | 8. This corporation has liability for | intangible tax under s 199.032, |
| 24 | 25 | 29 | 30 | | Florida Statutes 💢 Yes | □ No |
| | 9. Name and Address of Curre | nt Registered Agent | | | 10. Name and Address of New R | egistered Agent |
| | | | 8 | 11 Name | | |
| CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD | | | 8 | Street Addr | ress (P.O. Box Number is Not Acceptab | le) |
| | TION FL 33324 | | E | 13 | | |
| | | | 8 | City | | FL 85 Zip Code |
| or registere familiar with SIGNATURE | othe provisions of Sections 607.050; ed agent, or both, in the State of Flori h, and accept the obligations of, Sec Syndien, spector plants in have of registered agen | ida. Such change was authoriz tion 607.0505, Florida Statutes | ed by the co | e-named corpor rporation's boar pent signature require | ration submits this statement for the pur rd of directors. I hereby accept the app | rpose of changing its registered office ointment as registered agent. I am |
| 12. | | ID DIRECTORS | 13. | grant signature respone | ADDITIONS/CHANGES TO OFF | |
| TILE | VD | DELETE | 1.1 [1] | .E | 7.55.110(10.6) 74(356.70.6) | Change Addition |
| NAME | PALLEY, STEPHEN W. | | 1.2 NAN | të. | | |
| STREET ADDRESS | 45 E END AVENUE | | 1.3 STR | EET ADDRÉSS | • | |
| CHY-SI-20P | NEW YORK NY | | 1.4 CITY | -ST-ZIP | | |
| THLF | ٧ | ☐ DELETE | 2 1 TiT | E | | Change Addition |
| NAME | BIRKHAHN, JONATHAN | | 2 2 NAN | IE . | | |
| STREET ADDRESS | 245 W. 107TH ST. | | 2 3 STR | EET ADDRESS | | |
| 011Y - \$1 - Z IP | NEW YORK NY | | 2.4 CITY | '- ST - ZIP | | ···· |
| TILE | V | DELETE | 3 1 111 | .E | | Change Addition |
| NAME | FARRELL, MOIRA | | 3 2 NAN | ļ - | | |
| STREET ADDRESS | 7 FAIRVIEW AVENUE | | - I | EET ADDRESS | | |
| C-TY - ST - 7:P | SUMMIT NJ | F □ DCLTY! | | - S1 - ZIP | | Change |
| TITLE | CD CD | DELETE | 4 1 111 | | | Change Addition |
| NAME. | KING, ROGER | | 4.2 NAN | | | |
| STREET ADDRESS | 1301 SPANISH RIVER RD | | | EF1 ADDRESS | | |
| CITY - ST - ZIP | BOCA RATON FL PD | ☐ DELETE | 4 4 C/TY 5 1 T/T/ | r-ST-ZIP | | ☐ Change ☐ Addition |
| TULE | KING, MICHAEL | [] beering | 5 7 1111 5 2 NAM | | | |
| NAMÉ STREFT ADDRESS | 3200 RETREAT CT. | | | EET_ADDRESS | | 44400 |
| CITY - ST - ZIP | MALIBU CA | | | r-S1-ZIP | 90000174 | 44463 W2 015 |
| TITLE | VSD | DELETE | 6 1711 | | | Change Addition |
| NAME | KING, DIANA | | 6.2 NAN | | ***ZUU.UU | |
| STHEE! ADDRESS | RD1 BOX 96A | | | EET ADDRESS | | |
| CITY ST-ZIP | BASKING RIDGE NJ | | | r-ST-ZIP | | |
| 14. I do hereb | | with this filing is voluntarily fun | | | for the exemption stated in Section 119 | .07(3)(k), Florida Statutes. I further |

certify that the information indicated on this annual report or supplemental annual 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 16 Achanged, or on an all actiment with an address.

SIGNATURE:X

PED OR PRINTED NAME OF SIGNING OFFICE FOR DIRECTOR

3/6/96 20(-376-/3/3