

2007 FOR PROFIT CORPORATION ANNUAL REPORT

8/22/2007-90022-015-\$50.00-\$50.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P28734 1. Entity Name MTV NETWORKS COMPANY					
Principal Place of Business % MICHAEL D. FRICKLAS 1515 BROADWAY NEW YORK, NY 10036 US			Mailing Address % MICHAEL D. FRICKLAS 1515 BROADWAY NEW YORK, NY 10036		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 13-3557425	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET, SUITE 105 TALLAHASSEE, FL 32301				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE _____ Signature, typed or printed name of registered agent and the filer (if applicable) (NOTE: Registered Agent signature required when re-certifying)					
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY- ST- ZIP DEVS FRICKLAS, MICHAEL D 1515 BROADWAY NEW YORK, NY 10036 ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP 900110052289 09/28/07--01057--001 **500.00 ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP VPAS FUESRT, JANE R 1515 BROADWAY NEW YORK, NY 10036 ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP P MCGRATH, JUDY 1515 BROADWAY NEW YORK, NY 10036 ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP DSEVP Thomas E. Dooley 1515 Broadway New York, New York 10036 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP DSEVP Jacques Tortoroli 1515 Broadway New York, New York 10036 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP EVPCFO Collette Chestnut 1515 Broadway New York, New York 10036 ☐ Change ☒ Addition		
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 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 807, 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: <u>Jane R. Fuest</u> <u>Jane R. Fuest - Asst Sec. 8/20/07</u> (212) 646-6000 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					