


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

FILED

Jan 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P31671 (1)
1. Corporation Name
HARPERCOLLINS PUBLISHERS INC.

Principal Place of Business
10 EAST 53RD ST
NEW YORK NY

Mailing Address
10 EAST 53RD ST
NEW YORK NY



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 11/02/1990	
25		30		4. FEI Number 22-2812214	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES STREET SUITE 105 TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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 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 DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input type="checkbox"/> DELETE	1.1 TITLE	President	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	ANTHEA DISNEY		1.2 NAME	Jane Friedman			
STREET ADDRESS	10 EAST 53RD ST		1.3 STREET ADDRESS	10 East 53rd Street			
CITY-ST-ZIP	NEW YORK NY		1.4 CITY-ST-ZIP	New York, NY 10022			
TITLE	V	<input type="checkbox"/> DELETE	2.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	D'AGNES, GLENN		2.2 NAME				
STREET ADDRESS	10 EAST 53RD ST		2.3 STREET ADDRESS				
CITY-ST-ZIP	NEW YORK NY		2.4 CITY-ST-ZIP				
TITLE	V	<input type="checkbox"/> DELETE	3.1 TITLE	Vice President	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	ROWSEY, R. MICHAEL		3.2 NAME	Michael A. Salvi			
STREET ADDRESS	10 EAST 53RD ST		3.3 STREET ADDRESS	10 East 53rd Street			
CITY-ST-ZIP	NEW YORK NY		3.4 CITY-ST-ZIP	New York, NY 10022			
TITLE	GVP	<input type="checkbox"/> DELETE	4.1 TITLE	Executive Vice President	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	WILLIAM G. BAKER		4.2 NAME	Joe Kiener			
STREET ADDRESS	10 EAST 53RD ST		4.3 STREET ADDRESS	10 East 53rd Street			
CITY-ST-ZIP	NEW YORK NY		4.4 CITY-ST-ZIP	New York, NY 10022			
TITLE	CD	<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	MURDOCH, K. RUPERT		5.2 NAME				
STREET ADDRESS	10 EAST 53RD ST		5.3 STREET ADDRESS				
CITY-ST-ZIP	NEW YORK NY		5.4 CITY-ST-ZIP				
TITLE	SVP	<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	JAMES A. FOX		6.2 NAME				
STREET ADDRESS	10 EAST 53RD ST		6.3 STREET ADDRESS				
CITY-ST-ZIP	NEW YORK NY		6.4 CITY-ST-ZIP				

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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  Michael A. Salvi
Vice President, Tax 1/23/98

CR2E034 (10/97)