## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

## May 04, 2007 8:00 am Secretary of State DOCUMENT # P34511 05-04-2007 90087 025 \*\*\*150.00 AMERICAN MEDIA OPERATIONS, INC. Principal Place of Business Mailing Address 1000 AMERICAN MEDIA WAY C/O TAX DEPT 1000 AMERICAN MEDIA WAY STE A BOCA RATON, FL 33464-1000 BOCA RATON, FL 33464-1000 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 04302007 CR2E034 (12/06) Cha-P Applied For 4. FEI Number City & State City & State 59-2094424 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PCD ☐ Change Addition TITLE ☐ Delete TITLE PECKER, DAVID J NAME NAME STREET ADDRESS 1000 AMERICAN MEDIA WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOCA RATON, FL 334641000 TITLE ☐ Delete ☐ Channe Addition KAHANE, MIKE NAME NAME STREET ADDRESS 1000 AMERICAN MEDIA WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOCA RATON, FL 334641000 TITLE Addition 2 TITLE Delete ☐ Change SEIDEN, MINDY NAME NAME Brian Hinton 1000 AMERICAN MEDIA WAY STREET ADDRESS 1000 American Media Way STREET ADDRESS Boca Raton, FL 33464-1000 CITY-ST-ZIP BOCA RATON, FL 334641000 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE BEUTNER, AUSTIN NAMÉ NAME 1000 AMERICAN MEDIA WAY STREET ADDRESS STREET ADDRESS BOCA RATON, FL 334641000 CITY-ST-ZIP CITY-ST-ZIP TITLE D ☐ Delete TIRE ☐ Change ☐ Addition DINOVI. ANTHONY NAME NAME 1000 AMERICAN MEDIA WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 334641000 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME MITAL, NEERAJ NAME 1000 AMERICAN MEDIA WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOCA RATON, FL 334641000

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 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.

NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**