## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 13, 2000 8:00 am Secretary of State **DOCUMENT # P38755** 1. Entity Name MATINEE PRODUCTIONS, INC. 04-13-2000 90071 012 \*\*\*150.00 Mailing Address Principal Place of Business P.O. BOX 5023 100 UNIVERSAL CITY PLAZA NEW YORK NY 10150-5023 UNIVERSAL CITY CA 91608 099999 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 95-4370041 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS ☐ Change ☐ Addition TITLE TITLE ☐ Delete BUSCEMI, PAUL NAME NAME STREET ADDRESS 800 THIRD AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **NEW YORK NY 10022** ☐ Change ☐ Addition ☐ Delete TITLE TITLE PALOTAY, MARC NAME STREET ADDRESS 100 UNIVERSAL CITY PLAZA STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **UNIVERSAL CITY CA 91608** Change ☐ Addition CF0 ☐ Delete TITLE TITLE NAME NAME CHERNEY, PAMELA F 100 UNIVERSAL CITY PLAZA STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP UNIVERSAL CITY CA 91608 ☐ Addition ☐ Change ☐ Delete TITLE NAME GARCIA, SHARON S STREET ADDRESS STREET ADDRESS 100 UNIVERSAL CITY PLAZA CITY-ST-ZIP **UNIVERSAL CITY CA 91608** CITY-ST-ZIF ☐ Delete TITLE Change ☐ Addition TITLE MILLER, HOWARD NAME NAME STREET ADDRESS 800 THIRD AVENUE STREET ADDRESS CITY-ST-ZIF CITY-ST-7IP **NEW YORK NY 10022** TITLE ☐ Change ☐ Addition ☐ Delete TITLE RANDALL, KAREN NAME NAME

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-7IP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

100 UNIVERSAL CITY PLAZA

**UNIVERSAL CITY CA 91608** 

noum OURED GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/10/2000

(212) 572-7000