2005 FOR PROFIT CORPORATION ANNUAL REPORT				FILED Apr 25, 2005 8:00 am Secretary of State
1. Entity Nam	MENT # P93000071	630		04-25-2005 90279 038 ***150.00
Principal Place of Business 1 SUNAMERICA CENTER 37TH FLOOR LOS ANGELES, CA 90067 US		Mailing Address 1 SUNAMERICA CENTER 37TH FLOOR LOS ANGELES, CA 90067 US		
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03302005 Chg-P CR2E034 (10/03)
City & State		City & State		4. FEI Number Applied For 95-4447818 Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired Fee Required
	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Registered Agent
PRENTICE HALL CORPORATION SYSTEM 1201 HAYS STREET TALLAHASSEE, FL 32301				ess (P.O. Box Number is Not Acceptable)
			City	FL Zip Code
FILI After Ma	Signature, typed or printed name of registered agent 2 E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	9. Election Camp		\$5.00 May Be Added to Fees
1 0. NTLE	OFFICERS AND		11. TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
IAME STREET ADDRESS CITY - ST - ZIP	PUZON, VIRGINIA N 1 SUNAMERICA CENTER LOS ANGELES, CA 900676022		NAME STREET ADDRESS CITY-ST-ZIP	
TILE NAME Street adoress City-st-zip	V PETAK, WILLIAM 1 SUNAMERICA CENTER LOS ANGELES, CA 90067	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP	D WINTROB, JAY S. 1 SUNAMERICA CENTER LOS ANGELES, CA 90067	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change 🗌 Addition
TILE IAME STREET ADDRESS CITY- ST- ZIP	P NUSSENBLATT, ALAN 1 SUNAMERICA CENTER LOS ANGELES, CA 90067	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS NIXON, CHRISTINE A 1 SUNAMERICA CENTER LOS ANGELES, CA 90067	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		🗋 Delete	STREET ADDRESS 1	T Change X Addition Scott Gillis SunAmerica Center os Angeles, CA 90067
12. I hereby (certify that the information supplied with d on this report or supplemental report is	this filing does not qualify true and accurate and that	for the exemption stated in it my signature shall have t	n Section 119.07(3)(i), Florida Statutes. I further certify that the information the same legal effect as if made under oath; that I am an officer or director r 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

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