

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000096199

1. Entity Name
10'S, INC.

FILED
Sep 19, 2000 8:00 am
Secretary of State

09-19-2000 90101 001 *2,200.00

Principal Place of Business

605 LINCOLN RD.
MIAMI BEACH FL 33139

Mailing Address

152 WEST 57TH ST.
42ND FL.
NEW YORK NY 10019

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0888248

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VD
NAME GENACHOWSKI, JULIUS
STREET ADDRESS 152 W. 57TH ST., 42ND FL
CITY-ST-ZIP NEW YORK NY 10019 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE PD
NAME MILLER, JONATHAN
STREET ADDRESS 152 W. 57TH ST., 42ND FL
CITY-ST-ZIP NEW YORK NY 10019 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME BINZAK, DOUG
STREET ADDRESS 8800 W. SUNSET BLVD.
CITY-ST-ZIP WEST HOLLYWOOD CA 90069 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME ROSENBERG, HELEN
STREET ADDRESS 8800 W. SUNSET BLVD.
CITY-ST-ZIP WEST HOLLYWOOD CA 90069 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AT
NAME ANDERSON, SUSAN
STREET ADDRESS 8800 W. SUNSET BLVD.
CITY-ST-ZIP WEST HOLLYWOOD CA 90069 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AT
NAME MORGAN, KEN
STREET ADDRESS 1 HSN DRIVE
CITY-ST-ZIP ST. PETERSBURG FL 33729 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 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 an office or other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/13/00

212 314-7300

CR2E034 (5/00)