

**2016 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F13000003369

**Entity Name:** PS FLORIDA ONE, INC.

**Current Principal Place of Business:**

701 WESTERN AVENUE  
GLENDALE, CA 91201

**Current Mailing Address:**

701 WESTERN AVENUE  
GLENDALE, CA 91201

**FEI Number: 46-3309175**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ANDREWS, TODD  
Address        701 WESTERN AVENUE  
City-State-Zip: GLENDALE CA 91201

Title            ASST. SECRETARY  
Name            KAO, JOHN  
Address        701 WESTERN AVENUE  
City-State-Zip: GLENDALE CA 91201

Title            TREASURER, VP  
Name            ADAMS, DREW  
Address        701 WESTERN AVENUE  
City-State-Zip: GLENDALE CA 91201

Title            SECRETARY  
Name            HUGHES, LILY YAN  
Address        701 WESTERN AVENUE  
City-State-Zip: GLENDALE CA 91201

Title            SENIOR VICE PRESIDENT  
Name            DOLL, DAVID F  
Address        701 WESTERN AVENUE  
City-State-Zip: GLENDALE CA 91201

Title            VP  
Name            LINDER, SHARON  
Address        701 WESTERN AVENUE  
City-State-Zip: GLENDALE CA 91201

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: DREW ADAMS**

**TREASURER**

**05/23/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date