

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000002098

**Entity Name:** JCDECAUX NORTH AMERICA, INC.

**Current Principal Place of Business:**

350 FIFTH AVENUE  
73RD FLOOR  
NEW YORK, NY 10118

**FILED**  
**Apr 25, 2020**  
**Secretary of State**  
**4461525781CC**

**Current Mailing Address:**

350 FIFTH AVENUE  
73RD FLOOR  
NEW YORK, NY 10118 US

**FEI Number: 13-3855989**

**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            PARISOT, BERNARD  
Address        350 FIFTH AVENUE  
                  73RD FLOOR  
City-State-Zip: NEW YORK NY 10118

Title            CFO  
Name            BOISSEAU, SANDRA  
Address        350 FIFTH AVENUE  
                  73RD FLOOR  
City-State-Zip: NEW YORK NY 10118

Title            DIRECTOR  
Name            DECAUX, JEAN-LUC  
Address        3 PARK AVENUE  
                  33RD FLOOR  
City-State-Zip: NEW YORK NY 10016

Title            DIRECTOR  
Name            PARISOT, BERNARD  
Address        3 PARK AVENUE  
                  33RD FLOOR  
City-State-Zip: NEW YORK NY 10016

Title            SECRETARY  
Name            BAILEY, MARTHA D.  
Address        350 FIFTH AVENUE  
                  73RD FLOOR  
City-State-Zip: NEW YORK NY 10118

Title            CEO  
Name            DECAUX, JEAN-LUC  
Address        350 FIFTH AVENUE  
                  73RD FLOOR  
City-State-Zip: NEW YORK NY 10118

Title            CEO  
Name            PARISOT, BERNARD  
Address        350 FIFTH AVENUE  
                  73RD FLOOR  
City-State-Zip: NEW YORK NY 10118

*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: MARTHA D. BAILEY**

**SECRETARY**

**04/25/2020**

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

\_\_\_\_\_  
Date