CR2E034 (9/01)

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 834689 1. Entity Name TRANSPORTATION DISPLAYS INCORPORATED VIA CO M OUT OF GROUP Inc. Principal Place of Business Mailing Address						Secretary of State 02-20-2002 90018 006 ***150.00				
Principal Place 275 MADISO NEW YORK	N AVE.	Mailing Address 275 MADISON AVÉ. NEW YORK NY 10016								
Principal Place of Business 3. Mailing Address										
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & Stat	е	City & State			. FEI Number	13-2660769		_ 	plied For . ot Applicable	
Zip	Country	Zip	Country	5	. Certificate of	Status Desired		3.75 Add e Required	ditional	
	6. Name and Address of Current F	Registered Agent	Name		. Name and A	dress of New Regis	stered Age	∍nt		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301				Street Address (P.O. Box Number is Not Acceptable)						
			City				FL	Zip Code	9	
Tax filing r (See criter	Signature, typed or printed name of registered agent a pration is eligible to satisfy its intangible requirement and elects to do so.	After May 1, 20 Make Check Payal	02 Fee will be \$ ble to Departmen	0.00 0.550.00 nt of State	10. Electi Trust	on Campaign Financ Fund Contribution.		Added	O May Be to Fees	
11.	TEVR TO THE CONTROL OFFICERS AND D		12.		ADDITIONS/CH	IANGES TO OFFICE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	YEGELWEL; JODY 275 MADISON AVE. NEW YORK NY 10016	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				L	_) Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SULEMAN, FARID 40 WEST 57 STREET NEW YORK NY 10019	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS KOWALSKY-HAUT, TINA 275 MADISON AVE NEW YORK NY 10016	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				C.] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VCT PEARSON, DANIEL 275 MADISON AVE NEW YORK NY 10016	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALLMAN, DONALD R 275 MADISON AVE NEW YORK NY 10016	Ø Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2502	y HonTh	Black Canyon	N High	1 Change Way Y	Judition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KARMAZIN, MEL % INFINITY BROADCASTING, 40 NEW YORK NY 10019	₩ 57 ST	TITLE NAME STREET ADDRESS CITY-ST-7IP	Direct FAIRI	D Sules	MAN HADONSTIN	× ×	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 supplementar 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 trifstee 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.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

112 599-1100 Daytime Phone #