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FILED
Feb 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000003406 (3)

1. Corporation Name

BOZELL SAWYER MILLER GROUP INC.

Principal Place of Business

Mailing Address

75 ROCKEFELLER PLAZA
NY NY 10019

75 ROCKEFELLER PLAZA
NY NY 10019

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/03/1996

4. FEI Number

22-2752668

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 640 Fifth Avenue

Suite, Apt. #, etc.

22 City & State

23 New York, NY

24 Zip

10019

Country

25 US

2a. Mailing Address

26 640 Fifth Avenue

Suite, Apt. #, etc.

27 City & State

28 New York, NY

29 Zip

10019

Country

30 US

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD
LESLIE, JOHN
75 ROCKEFELLER PLAZA
NY NY 10019

☐ DELETE

CEOD
DIAMOND, HARRIS
75 ROCKEFELLER PLAZA
NY NY 10019

☐ DELETE

CFOD
POWERS, EDWARD
75 ROCKEFELLER PLAZA
NY NY 10019

☐ DELETE

V
NEWMAN, RICHARD J
75 ROCKEFELLER PLAZA
NY NY 10019

☒ DELETE

EVST
GARD, KENNETH E
302 S 38 ST
OMAHA NE

☐ DELETE

V
SCHULTZ, MICHAEL L
302 S 38 ST
OMAHA NE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

PD
LESLIE, JOHN

☒ Change ☐ Addition

640 FIFTH AVENUE

NEW YORK, NY 10019

CEOD

☒ Change ☐ Addition

DIAMOND, HARRIS

640 FIFTH AVENUE

NEW YORK, NY 10019

CFOD

☒ Change ☐ Addition

POWERS, EDWARD

640 FIFTH AVENUE

NEW YORK, NY 10019

V

☐ Change ☒ Addition

DORMEN, SCOTT

640 FIFTH AVENUE

NEW YORK, NY 10019

☐ Change ☐ Addition

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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:



MICHAEL SCHULTZ, SENIOR V.P. 2/12/98

(402) 978-4046

CP2E034 (10/97)