


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 08:00 AM
Secretary of State

DOCUMENT # F96000004933	
1. Entity Name HAVAS HOLDINGS, INC.	

Principal Place of Business 430 MOUNTAIN AVENUE MURRAY HILL, NJ 07974	Mailing Address 430 MOUNTAIN AVENUE MURRAY HILL, NJ 07974
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DO NOT WRITE IN THIS SPACE

01022008 No Chg-P CR2E034 (11/05)

4. FEI Number 52-1983617	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1202 HAYS STREET
TALLAHASSEE, FL 32301**

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOC RODES VILA, FERNANDO 2 ALLEE DE LONGCHAMP 92281 SURESNES CEDEX FRANCE,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP PHILLIPPE, HERVE 2 ALLEE DE LONGCHAMP 92281 SURESNES CEDEX FRANCE,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP WYNNE, NANCY 350 HUDSON STREET NEW YORK, NY 10014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BAGAROZZA, PATRICK 430 MOUNTAIN AVE MURRAY HILL, NJ 07974
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ALEXANDER, ROBERT 430 MOUNTAIN AVE MURRAY HILL, NJ 07974
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DILLES, JACQUES 350 HUDSON ST NEW YORK, NY 10014

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICK BAGAROZZA *Patrick J. Bagarozza* **1/03/2008** **(708) 771-7455**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #