

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F9600000.4933

1. Entity Name

SNYDER COMMUNICATIONS, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 MAY 30 AM 11:55

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

430 Mountain Avenue

Suite, Apt. #, etc.

3. Mailing Address

430 Mountain Avenue

Suite, Apt. #, etc.

City & State

Murray Hill, NJ

City & State

Murray Hill, NJ

Zip

07974

Country

USA

Zip

07974

Country

USA

4. FEI Number

52-1983617

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

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

1202 Hays Street

City

Tallahassee

FL

Zip Code
32301

**DO NOT WRITE
IN THIS SPACE**

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

Carol K. Doherty

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

see attached rider

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

500017813065

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael J. Ducas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL J. DUCAS, VP+CTO

4/28/03

Date

908-771-7455

Daytime Phone #

CR2E034B (12/02)

Officers of Snyder Communications, Inc.

<u>Name and Title</u>	<u>Business Address</u>
Alain de Pouzilhac <i>Chairman, CEO & President</i>	2 allée de Longchamp 92281 Suresnes Cedex, France
Jacques Herail <i>Senior Vice President</i>	2 allée de Longchamp 92281 Suresnes Cedex, France
Nancy Wynne <i>Secretary & Vice President</i>	350 Hudson Street New York, NY 10014
Robert Bastian <i>CFO</i>	350 Hudson Street New York, NY 10014
Robert W. Parker <i>Vice President</i>	350 Hudson Street New York, NY 10014
Michael Ducas <i>Vice President Chief Tax Officer</i>	430 Mountain Avenue Murray Hill, NJ 07974

Directors of Snyder Communications, Inc.

Alain de Pouzilhac	2 allée de Longchamp 92281 Suresnes Cedex, France
Jacques Herail	2 allée de Longchamp 92281 Suresnes Cedex, France



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 075783 5044876

AUTHORIZATION :

Patricia Figueira

COST LIMIT : \$ 300.00

ORDER DATE : April 30, 2003

ORDER TIME : 8:43 AM

ORDER NO. : 075783-005

CUSTOMER NO: 5044876

CUSTOMER: Ms. Dale Cassidy
Havas Advertising Inc.
430 Mountain Avenue

Murray Hill, NJ 07974

RESUBMIT

Please give original
submission date as file date.

ANNUAL REPORT FILING

NAME: SNYDER COMMUNICATIONS, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext. 1156

EXAMINER'S INITIALS: _____