FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700000370

1. Corporation Name

FILED Feb 17, 1999 8:00 am Secretary of State

02-17-1999 90016 016 ***150.00

PACE C	OMMUNICATIONS GROUP,	INC.			
Dringinal Plac	o of Rusiness	Mailing Address			a iii aa ii aaib a iiid i ab ii aa ii d a i
,					
485 FIFTH AVENUE NEW YORK NY 10017 485 FIFTH AVENUE NEW YORK NY 10017					
				DO NOT WRITE IN T	HIS SPACE
				3. Date incorporated or Qualifed	
				12/20/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 26			13-1598443	Not Applicable	
Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
22 27				<u> </u>	
City & State City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
23	Country		Country		
Zip	Country	- · · · ·	30	 This corporation owes the current year Personal Property Tax. 	Yes 🗆 No
24	9. Name and Address of Curre		301	10. Name and Address of New Register	
	5. Name and Address of Cure.	it itegistorea Agent	81 Name		
UNITED CORPORATE SERVICES, INC.					*************************************
801 NORTHEAST 167TH ST., SUITE 300			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
NORTH MIAMI BEACH FL 33162			83	12 1 3 4 4 1 1 1 4 4 1 1 1 1 1 1 1 1 1 1 1	
					A Septite Section 1
			84 City		85 Zip Code
44 Pursuant	to the provisions of Sections 607 05	02 and 607 1508 Florida Statute	s the above-named co	progration submits this statement for the purpose	e of changing its registered
office or r agent. I a	egistered agent, or both, in the State im familiar with, and accept the obliga-	of Florida. Such change was au ations of, Section 607.0505, Flori	thorized by the corpore da Statutes.	orporation submits this statement for the purpos ation's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE	Signature, typed or printed name of registered age	ent and title if anniicable /NOTE:	Registered Agent signature reg	uired when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 12
TITLE	Р	☐ DELETE	1.1 T/TLE		☐ Change ☐ Addition
NAME	NULMAN, RICHARD		1.2 NAME	•	
STREET ADDRESS	400 0000 4 41 100 11 10		1.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 100 <u>17</u>		1.4 CITY-ST-ZIP		
TITLE	EVP	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	GRIMES, JOHN		22 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 100 <u>17</u>		2. 4 CITY-ST-ZIP	·	
TITLE	ST	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	CANTOS, JOEL		3.2 NAME	•	
STREET ADDRESS			3.3 STREET AODRESS	*1. ***q	
CITY-ST-ZIP	NEW YORK NY 10017		3.4. CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		Change Addition
NAME	LERWILL, ROBERT		4. 2 NAME		
STREET ADDRESS	WPP GROUP - 27 FARM STRE	EET .	4.3 STREET ADDRESS		
CITY-ST-ZIP	LONDON WIX 6RD		4.4 CITY-ST-ZIP		·
TITLE	CEO	☐ DELETE	5.1 TITLE		Change Addition
NAME	BAGLEY, MILTON		5.2 NAME	•	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10017		5.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	NEUMAN, THOMAS		6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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 of vustee 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

NEW YORK NY 10017

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR