FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State
05-24-2002 91347 041 ***550.00

DOCUMENT # F99000000187 (NCLW) ✓

1. Entity Name

MKTG TeleServices, Inc. (f/k/a MSGI Direct, Inc.)

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
101 Continental Blvd. Suite, Apt. #, etc. Suite 400	101 Continental Blvd. Suite, Apt. #, etc. Suite 400
City & State El Segundo, CA 90245	City & State El Segundo, CA 90245
Zip / Country USA	Zip / Country USA

4. FEI Number 95-3879807 ☐ 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): 1201 Hays St.

City: TAllahassee FL Zip Code: 32301-2525

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.

SIGNATURE _____ DATE

(Signature, typed or printed name of registered agent and title if applicable.) (Note: Registered Agent Signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO Jeremy Barbera 333 Seventh Ave., NY NY 10001
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sr. VP/Director Paul S. Papich 101 Continental Blvd, Ste 400 El Segundo, CA 90245
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer/Secretary Tom Scheir 101 Continental Blvd. Ste. 400 El Segundo, CA 90245
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Cindy Hill 333 Seventh Ave., NY NY 10001
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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CR2E034B (12/01)

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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Paul S. Papich — Paul S. Papich — 4/30/02 — (310) 760-0770

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