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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT #

FRIENDSHIP MOTORS PERRY COMPANY

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FILED May 16 1997 8:00am Secretary of State



Principal Place of Business Mailing Address				4 INDRINGIN AN INDRY IRROR VIAND NIND YINI DIBIN DIBIN BIBIR BYDIN DIBIN DIBIN DIBIN					
1416 W. BASE ST. MADISON FL 32340 US			P.O. BOX 277 ST. MARKS FL 32355-0277 US						
						3. Date Incorporated or Qualified 06/04/1990	3a. Date of L. 05/01/19	'	
_	Place of Business	2a. Mailing	g Address			4. FEI Number		Applied For	
21 Culto Ant	# ala	26		i		59-3013658		Not Applicable	
22 Suite, Apr.	Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired		75 Additional	
City & Stat	е	27 City 8	State					e Required	
23	& State City & State				Election Campaign Financing Trust Fund Contribution		.00 May Be		
Zip	Country	Zip		Countr	у	8. This corporation has liability for i			
24	25	29	3		-		Yes No	JC 8. 199.032,	
	9. Name and Address of Cu	rrent Registered A	gent			10. Name and Address of New Re			
JOI	NES, E. HOWARD			81	Name				
	NEWPORT ROAD			82	Street	Address (P.O. Box Number is Not Acceptab	lo)		
ST.	MARKS FL 32355				Oli Got 1	radiosa (i .o. box italibel is itot Acceptab	ne)		
				83)				
				84	City		—. 85	Zip Code	
					/			· I	
11. Pursuant office or a	to the provisions of Sections 607 registered agent, or both, in the S	.0502 and 607,1508	s, Florida Statutes	, the abov	e-named	corporation submits this statement for the p noration's board of directors. I hereby accep	urpose of chang	ing its registered	
agent. I a	im familiar with, and accept the o	bligations of, Sectio	n 607.0505, Flori	da Statute	is.	solutions board of directors. Thereby accept	и ине арролилы	it as registered	
SIGNATURE		.							
12.	Signature, typed or printed name of registere	AND DIRECTORS	ie. (NOTE: F	legistered Ag	ient signature	required when reinstatings ADDITIONS/CHANGES TO OFFICE	DATE:	OTODO (A) 40	
TITLE	D	AND DIRECTORS	DELETE	1.1 HTLE		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC		
NAME	JONES, E. HOWARD			1.2 NAME			المبيا المبيا	ings Noullion	
STREET ADDRESS	3005 AVON CIRCLE				T ADDRESS				
CITY-ST-ZIP	TALLAHASSEE FL			1.4 CITY-				1	
TITLE	D		DELETE	2.1 TITLE	51 EII		☐ Cha	nge Addition	
NAME 41	JONES, EDWIN H.			2.2 NAME				_	
STREET ADDRESS	750 DUPARC CIRCLE			2.3 STHEE	T ADDRESS				
CITY-ST-ZIP	TALLAHASSEE FL			2 # CITY-	ST-ZIP			:	
TITLE	ng .		DELETE	3.1 111LE		Rand of	r · ☐ Cha	nge Addition	
NAME	•* • •			3.2 NAME				ľ	
STREET ADDRESS				3.3 STREE	t address				
CITY-ST-ZIP			D Section	3.4. CITY-	ST - Z(P				
TITLE			☐ DELETE	4.1, TITLE			Cha	nge 🔲 Addition	
NAME				4. 2 NAME					
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP TITLE			DELETE	4.4 CITY - 5	ST-ZIP		T 20	1 43.99	
NAME			U OLCCIE	5.1 TITLE			☐ Cha	nge L Addition	
STREET ADDRESS				5.2 NAME	I ADDRESS			:	
CITY-ST-ZIP					T ADDRESS				
TITLE	· · · · · · · · · · · · · · · · · · ·		DELETE	5.4 CITY - S 6.1 TITLE	51-ZIP		☐ Cha	nge Addition	
NAME	Control of the Contro			6.2 NAME			L., Cila	ngo 🗀 AOURION	
STREET ADDRESS				•	T ADDRESS				
CITY-ST-ZIP				•	- 1				
	ov certify that the information suc	olied with this filing	door not qualify f	64 CITY-S		oted in Continu 110 07/2V/3 Closide Chatter	16.46	D. 14 10	

to be easy calling 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 eath; that a man 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 12 or Block 12 or on any Jachment with an address.

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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 837663
1. Corporation Name
JWT SPECIALIZED COMMUNICATIONS, INC.

(4)

Principal Place of Business Mailing Address 6500 WILSHIRE BLYD. C/O WPP GROUP USA. IN 21ST FLOOR 309 W 49TH ST. TAX DEP LOS ANGELES CA 80048 NEW YORK N 10019-7316			PT.	-						
U\$		US				3. Date Incorporated or Qualified 01/06/1977	3a. 0	Date of Last Ro 5/01/1996	eport	
2. Principal	Place of Business	26. Mailing Address 26				4. FEI Number 95-1929627			plied For	
Sulte, Ap	et. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A	Additional	
City & Sta	ate	City & State				6. Election Campaign Financing		\$5.00	May Be	
ZIP	Country	28 Zip	Count	ry		Trust Fund Contribution 8. This corporation has liability for	r intangible	Added t e tax under s.		
24	25	29	30			Florida Statules	Yes	☐ No		
<u></u>	 Name and Address of Cur CORPORATION SYSTEM 	rent Registered Agent		1 N	ame	10. Name and Address of New F	egistered	Agent	····	
	100 S. PINE ISLAND ROAD		6		arne					
	ANTATION FL 33324		8	2 S	treet Addre	ess (P.O. Box Number is Not Accept	able)			
**			8	3						
			8	4 C	ity		FI	85 Zip (Code	
11. Pursuar office o	nt to the provisions of Sections 607. r registered agent, or both, in the St	0502 and 607.1508, Florida State ate of Florida. Such change was	iles, the abo authorized I	ve-na by th	amed corporation	oration submits this statement for the on's board of directors. I hereby acc			s registered registered	
agent. I SIGNATURE	<u> </u>		lorida \$tatut	es.						
40	Signature, typed or printed name of registered			gent s	gnature require	d when reinstaling)	DATE	D DIDECTOR	0.001.40	
12.	SVP	AND DIRECTORS DELETE	13. 1,1 1 I I L E			ADDITIONS/CHANGES TO OFF	ICERS AN	Change	S IN 12	
NAME	TROUP, ELEANOR	Octob	1,2 NAMI		ļ			ondrige	L Vaginon	
STREET ADDRESS	s 2296 HENDERSON MILL RI	306	1,3 STRE		BESS					
CITY-ST-ZIP	ATLANTA GA		1,4 CITY							
TITLE	PCD	DELETE	2.1 TITLE					Change	Addition	
NAME	MACALISTER, KIM		2,2 NAMI	E						
STREET ADDRESS	s 6500 WILSHIRE BLVD		2,3 STRE	ET ADD	RESS					
CITY-ST-ZIP	LOS ANGELES CA				IP .					
TITLE	HANSEN, ALEXANDER E	DELETE	3,1 TITLE					L Change	Addition	
NAME "	ARAA WII CHIDE RI VA		3.2 NAM							
STREET ADDRESS	LOS ANGELES CA		3,3 STRE							
CITY-ST-ZIP	1	DELETE	3,4. CITY 4,1 Title		ır			Change	Addition	
NAME	NEUMAN, THOMAS O	-	4, 2 NAM					0,		
STREET ADDRESS			4.3 STRE		RESS					
CITY-ST-ZIP	NEW YORK NY		4.4 CITY	- ST - ZI	Р					
TITLE	NP DECC ICCC	DELETE	5.1 TITLE					Change	Addition	
NAME	PRESS, JEFF 6500 WILSHIRE BLVD.		5.2 NAMI		- 1					
STREET ADDRESS	LOS ANGELES CA		5.3 STRE	ET ADO	RESS					
CITY-ST-ZIP	AS	DELETE	5.4 CITY		P			Change	f.dditta-	
TITLE NAME	FITZPATRICK, NANCY	ניין הנינור	6.1 TITLE 6.2 NAMI					∟ -change	☐ Addition	
STREET ADDRESS	JOS LEVINGTON AVE		6.3 STRE		iRESS					
CITY-ST-ZIP	NEW YORK NY		6.4 CITY							
14. I do her	tion indicated on this annual report :	or supplemental annual report is	lify for the ex	xemp curat	tion stated	in Section 119.07(3)(i), Florida Statu my signature shall have the same le as required by Chapter 607, Florida	oal effect a	as if made und	der oath: that	