POIDONOS10

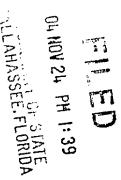
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



200042510942

11/24/04--01017--011 **35.00



Ps 12/3/04/ 20

COVER LETTER

TO:	Amendment Section Division of Corporations				
SUBJ	ECT: RUBICAM STRATEGIC ALLIANCE, INC. (Name of corporation)				
DOCI	JMENT NUMBER: P01000110510				
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:					
Maryna P. Harwood (Name of contact person)					
Olen Inc. (Firm/Company)					
234 Hudson Ave., 6566 (Address)					
Albany, NY 12210 (City/state and zip code)					
For further information concerning this matter, please call:					
	88 544 77 3 Maryna P. Harwood at (888) 441-7773				
	(Name of contact person) (Area code & daytime telephone number)				
Enclos	ed is a \$35.00 check made payable to the Department of State.				
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399				

CR2E045(6/04)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.050 nge is submitted for a corporation organ	nized under the laws of the State of \overline{F}	lorida	
	r to change its registered office or regist	•	'orida.	
1. The name of t	he corporation: RUBICAM STRATEGIC	CALLIANCE, INC.	<u> </u>	
2. The principal	office address: SAVELOVSKAYA STR	EET, 15, 3RD FLOOR, 341, MOSC	OW, RU	
3. The mailing a	ddress (if different): 1455 TALLEVAST	ROAD,		
	STE. #L8319, SA	RASOTA , FLORIDA 34243	<u> </u>	
4. Date of incorp	oration/qualification: 11/15/2001	Document number: P0100011	10510	
5. The name and Florida Depart	street address of the current registered attent of State:	agent and registered office on file with	1 the	
	JOSEPH EVANS			
1455 TALLEVAST ROAD, STE. #L8319				
	SARASOTA , FLORIDA 342	243	ALL OF THE	
6. The name and (if changed):	street address of the new registered ages	nt (if changed) and /or registered offic	OH NOV 24 PM	
	JOSEPH EVANS		The B	
	1901 60TH PLACE, STE. #	L8319	STA LOGA	
(P.O. Box NOT acceptable)				
	BRADENTON, FL 34203			
The street address as changed will	ss of its registered office and the street be identical.	address of the business office of its	registered agent,	
Such change was authorized by the	s authorized by resolution duly adopte e board, or the corporation has been no	d by its board of directors or by an optified in writing of the change.	officer so	
Busucha	Sauch	BERUSKA SANCHEZ		
	e of an officer or director)	(Printed or typed name and tit	,	
I hereby accept to I further agree to of my duties, and document is bein corporation has	the appointment as registered agent and comply with the provisions of all stated I am familiar with and accept the obling filed merely to reflect a change in the peen notified in writing of this change	nd agree to act in this capacity, sutes relative to the proper and compligation of my position as registered are registered office address, I hereby	plete performance agent. Or, if this confirm that the	
Lead		September 1, 2004		
(Sign	nature of Registered Agent)	(Date)		
If signing on beh	nalf of an entity:			
	mad or Brintad Nama)			

* * * FILING FEE: \$35.00 * * *