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

STREET ADDRESS

SIGNATURE:

CITY - ST - ZIP

FILED Apr 03 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P11071 (8)SELTEL, INC. Principal Place of Business Mailing Address 40 WEST 57TH STREET 40 WEST 57TH STREET NEW YORK NY 10019 NEW YORK NY 10019 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/11/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 06-0963166 Not Applicable 26 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CT CORPORATION SYSTEM C/O CT CORPORATION SYSTEM 82 Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. 83 **PLANTATION FL 33324** City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 697.0505, Florida Statutes. SIGNATURE Signature, typied or printed hadre of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. VS Change X Addition TITLE DELETE 1.1 TITLE President, John F Higgins OLDS, STUART O NAME 12 NAME 125 W 55th St 125 WEST 55TH ST STREET ADDRESS 1.3 STREET ADDRESS New York, NY 10019 **NEW YORK NY** 1.4 CITY - ST - ZIP CITY-ST-ZIP Sr Vice President & Asst DELETE 2 1 7 (TLE Change X Addition OLSON, THOMAS F 2.2 NAME NAME Richard E Vendie **125 WEST 55TH ST** 2.3 STREET ADDRESS STREET ADDRESS 125 W 55th St **NEW YORK NY** 2 4 CITY - S1 - ZIP CITY - ST - ZIP New York, NY 10019 DELETE Change Addition TITLE 3.1 TITLE ROBINSON, DONALD L 3.2 NAME NAME **40 WEST 57TH STREET** STREET ADDRESS 3.3 STREET ADDRESS **NEW YORK NY** CITY-ST-ZIP 3 4. CITY - ST - 2(P DELETE Channe Addition TITLE 4.1 TITLE OLSON, THOMAS F NAME 4.2 NAME **125 WEST 55TH ST** STREET ADDRESS 4.3 STREET ADDRESS **NEW YORK NY** CITY-ST-ZIP 4.4 CITY - S1 - ZIP Change DELETE Add-tion TITL E 5.1.1016 5.2 NAME STREET ADDRESS 5.9 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition NAME 6.2 NAME

> 6.3 STREET ADDRESS 64 CITY - ST - ZIP

14. Thereby 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 supplicated 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 comporation or the receiver or trustice 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 of an aliachment with an address. JOHN F HIGGINS 3/20/98 (212) 632-9670

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