

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra P. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P33120

(7)

1. Corporation Name
BBDO ATLANTA, INC.

FILED

97 JUL -7 AM 10: 28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
3414 PEACHTREE ST NE S1600
ATLANTA GA 30326

Mailing Address
3414 PEACHTREE ST NE S1600
ATLANTA GA 30326-1113

3. Date Incorporated or Qualified
03/12/1991

3a. Date of Last Report
08/29/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

58-1597648

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME MITCHUM, DON
STREET ADDRESS 11 THE FAIRWAY
CITY-ST-ZIP WOODSTOCK GA

TITLE Secretary
NAME WAGNER, BARRY J.
STREET ADDRESS 58 Bowden Rd.
CITY-ST-ZIP SOUTH SALEM NY 10590

TITLE Director
NAME CLARK, THOMAS
STREET ADDRESS 310 N. CRANBROOK ROAD
CITY-ST-ZIP BLOOMFIELD HILLS MI

TITLE Vice President
NAME SCHROEDER, JOSEPH P
STREET ADDRESS 3467 REMEMBRANCE TRACE
CITY-ST-ZIP LAWRENCEVILLE GA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President
1.2 NAME Laurence Tolpin
1.3 STREET ADDRESS 3414 Peachtree Rd NE, Ste 1600
1.4 CITY-ST-ZIP Atlanta, GA 30326

2.1 TITLE
2.2 NAME 300002235363--2
2.3 STREET ADDRESS -07/10/97--01095--013
2.4 CITY-ST-ZIP *****165.00 *****165.00

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 or trustee 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

SIGNATURE: Laurence Tolpin 5/11/97 (212) 459-5000

CR2E034 (9/96)