

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90329 011 ***150.00

DOCUMENT # P38466

1. Entity Name
BATES ADVERTISING USA, INC.



Principal Place of Business
**498 SEVENTH AVE
NEW YORK, NY 10018**

Mailing Address
**C/O MICHAEL KOPCSAK
498 SEVENTH AVENUE
NEW YORK, NY 10018 US**

14001590

2. Principal Place of Business
C/O WPP, 125 Park Ave.
Suite, Apt. #, etc.

3. Mailing Address
C/O WPP, 125 Park Ave.
Suite, Apt. #, etc.

02122004 Chg-P CR2E034 (10/03)

City & State
New York, NY

City & State
New York, NY

4. FEI Number
13-2993871

Applied For
Not Applicable

Zip
10017

Country
USA

Zip
10017

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CD
HEARN, DAVID
498 SEVENTH AVENUE
NEW YORK, NY 10018** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
SCOTT, CHARLES
498 SEVENTH AVENUE
NEW YORK, NY 10018** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
BELAND, ANDREW
498 SEVENTH AVENUE
NEW YORK, NY 10018** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
DENISE, WILLIAMS
498 SEVENTH AVENUE
NEW YORK, NY 10018** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VSD
KOPCSAK, MICHAEL J
498 SEVENTH AVENUE
NEW YORK, NY 10018** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AT
SADOWSKI, MARK K
498 SEVENTH AVENUE
NEW YORK, NY 10018** ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**President/Director
HOWE, MARY ELLEN
125 PARK AVE
NEW YORK, NY 10017** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SVP-Treasurer
NEWMAN, THOMAS O.
125 PARK AVE
NEW YORK, NY 10017** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP/Secretary/Director
FAREWELL, KEVIN
125 PARK AVE.
NEW YORK, NY 10017** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP/Treasurer
LOBENE, TOM
125 PARK AVE
NEW YORK, NY 10017** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Director
RICHARDSON, PAUL
125 PARK AVE
NEW YORK, NY 10017** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP/Secretary/Director ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Thomas O. Newman*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas O. Newman **4/2/04 212-632-2200**
Date Daytime Phone #