

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000002880

**Entity Name:** VML, INC.**Current Principal Place of Business:**250 RICHARDS ROAD  
KANSAS CITY, MO 64116**Current Mailing Address:**C/O WPP  
100 PARK AVENUE, 4TH FLOOR  
NEW YORK, NY 10017 US**FEI Number:** 43-1618412**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD  
#221E  
PALM BEACH GARDENS, FL 33410 US*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.***SIGNATURE:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	SECRETARY, DIRECTOR
Name	FAREWELL, KEVIN
Address	C/O WPP 100 PARK AVENUE, 4TH FLOOR
City-State-Zip:	NEW YORK NY 10017

Title	TREASURER, DIRECTOR
Name	LOBENE, TOM
Address	C/O WPP 100 PARK AVENUE, 4TH FLOOR
City-State-Zip:	NEW YORK NY 10017

Title	ASST. SECRETARY
Name	GRAZIANO, THOMAS
Address	C/O WPP 100 PARK AVENUE, 4TH FLOOR
City-State-Zip:	NEW YORK NY 10017

Title	VP-TAX COUNSEL
Name	STASIULIS, PAUL
Address	C/O WPP 100 PARK AVENUE, 4TH FLOOR
City-State-Zip:	NEW YORK NY 10017

Title	CFO
Name	BELLINGHAUSEN, HIM
Address	250 RICHARDS ROAD
City-State-Zip:	KANSAS CITY MO 64116

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: KEVIN FAREWELL****SECRETARY****04/13/2017**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date