#### 2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007189

Entity Name: OUTFRONT MEDIA OUTERNET INC.

**Current Principal Place of Business:** 

405 LEXINGTON AVENUE NEW YORK, NY 10174

## **Current Mailing Address:**

**405 LEXINGTON AVENUE** NEW YORK, NY 10174 US

FEI Number: 04-3531204 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Title

Electronic Signature of Registered Agent

EXECUTIVE VICE PRESIDENT, CHIEF

Date

**FILED** Feb 01, 2019

**Secretary of State** 

8675094563CC

#### Officer/Director Detail :

Title **TREASURER** Title CEO

KARABAS, JONATHAN D MALE, JEREMY J Name Name

**405 LEXINGTON AVENUE** Address **405 LEXINGTON AVENUE** Address NEW YORK NY 10174 NEW YORK NY 10174 City-State-Zip: City-State-Zip:

Title DIRECTOR, EXECUTIVE VICE Title DIRECTOR, SENIOR VICE PRESIDENT

**PRESIDENT** WOOD, GEORGE Name

Name SAUER, RICHARD H Address 405 LEXINGTON AVENUE

**405 LEXINGTON AVENUE** Address City-State-Zip: NEW YORK NY 10174

City-State-Zip: NEW YORK NY 10174

**EXECUTIVE VICE PRESIDENT** Title REVENUE OFFICER

Name SENESE, JODI PUNTER, CLIVE Name

Address **405 LEXINGTON AVENUE** Address **405 LEXINGTON AVENUE** City-State-Zip: NEW YORK NY 10174 City-State-Zip: NEW YORK NY 10174

Title EXECUTIVE VICE PRESIDENT SENIOR VICE PRESIDENT Title

Name TOSTANOSKI, NANCY Name SIRY, THEODORE G. Address **405 LEXINGTON AVENUE** Address **405 LEXINGTON AVENUE** City-State-Zip: NEW YORK NY 10174 City-State-Zip: NEW YORK NY 10174

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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.

02/01/2019 DIRECTOR SIGNATURE: RICHARD H SAUER

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title ASSISTANT SECRETARY
Name CAPOCASALE, LOUIS J
Address 405 LEXINGTON AVENUE
City-State-Zip: NEW YORK NY 10174