

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000007189

**FILED**  
**Apr 12, 2021**  
**Secretary of State**  
**6514024880CC**

**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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           TREASURER  
Name           KARABAS , JONATHAN D  
Address        405 LEXINGTON AVENUE  
City-State-Zip: NEW YORK NY 10174

Title           CEO, PRESIDENT  
Name           MALE , JEREMY J  
Address        405 LEXINGTON AVENUE  
City-State-Zip: NEW YORK NY 10174

Title           DIRECTOR, SENIOR VICE PRESIDENT  
Name           WOOD , GEORGE  
Address        405 LEXINGTON AVENUE  
City-State-Zip: NEW YORK NY 10174

Title           DIRECTOR, EXECUTIVE VICE PRESIDENT  
Name           SAUER, RICHARD H  
Address        405 LEXINGTON AVENUE  
City-State-Zip: NEW YORK NY 10174

Title           EXECUTIVE VICE PRESIDENT, CHIEF REVENUE OFFICER  
Name           PUNTER, CLIVE  
Address        405 LEXINGTON AVENUE  
City-State-Zip: NEW YORK NY 10174

Title           EXECUTIVE VICE PRESIDENT  
Name           SENESE, JODI  
Address        405 LEXINGTON AVENUE  
City-State-Zip: NEW YORK NY 10174

Title           SENIOR VICE PRESIDENT  
Name           SIRY, THEODORE G.  
Address        405 LEXINGTON AVENUE  
City-State-Zip: NEW YORK NY 10174

Title           EXECUTIVE VICE PRESIDENT  
Name           TOSTANOSKI, NANCY  
Address        405 LEXINGTON AVENUE  
City-State-Zip: NEW YORK NY 10174

**Continues on page 2**

*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:** CAPOCASALE, LOUIS J.

**CORPORATE SECRETARY**

**04/12/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

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

Title DIRECTOR, EXECUTIVE VICE  
PRESIDENT  
Name SIEGEL, MATTHEW  
Address 405 LEXINGTON AVENUE  
City-State-Zip: NEW YORK NY 10174