

**TRADEMARK ASSIGNMENT**

Electronic Version v1.1  
 Stylesheet Version v1.1

SUBMISSION TYPE:	NEW ASSIGNMENT
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NATURE OF CONVEYANCE:	CHANGE OF NAME
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CONVEYING PARTY DATA			
Name	Formerly	Execution Date	Entity Type
Carat France		06/27/2003	JOINT STOCK COMPANY: FRANCE

RECEIVING PARTY DATA	
Name:	Aegis Media France
Street Address:	4, place de Saverne
City:	Courbevoie
State/Country:	FRANCE
Postal Code:	92400
Entity Type:	JOINT STOCK COMPANY: FRANCE

PROPERTY NUMBERS Total: 1		
Property Type	Number	Word Mark
Registration Number:	1573741	CARAT

CORRESPONDENCE DATA	
Fax Number:	(212)808-0844
<i>Correspondence will be sent via US Mail when the fax attempt is unsuccessful.</i>	
Phone:	2128080700
Email:	bslonda@nmmlaw.com
Correspondent Name:	Norris, McLaughlin & Marcus, P.A.
Address Line 1:	220 E. 42nd Street
Address Line 4:	New York, NEW YORK 10017

ATTORNEY DOCKET NUMBER:	103151-18
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DOMESTIC REPRESENTATIVE	
Name:	Norris, McLaughlin & Marcus, P.A.
Address Line 1:	220 E. 42nd Street
Address Line 4:	New York, NEW YORK 10017

CH \$40.00 1573741

NAME OF SUBMITTER:

Bruce S. Londa

**Total Attachments: 4**

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Elle leur garantit un droit d'accès et de rectification pour les données les concernant auprès des organismes destinataires de ce formulaire.

# M2 **DECLARATION DE MODIFICATION**

8962011

RESER M GUIDBEFHJKT  
Déclar: 69251  
reque 324226

**PERSONNE MORALE**

Dénomination, forme juridique, capital  
 Déclaration relative à un établissement : (ouverture, modification, transfert, mise en location gérance, fermeture)  
 Reprise d'activité

Transfert du siège  
 Dissolution

Prise d'activité d'une société créée sans activité  
 Cessation totale d'activité sans disparition de la personne morale  
 Autre

GIE - Gtlic

**REPLIR DANS TOUS LES CAS les cadres n° 1, 2, 17, 18 ET LES MENTIONS NOUVELLES OU MODIFIEES en indiquant la date de l'évènement.**

**RAPPEL D'IDENTIFICATION AVANT MODIFICATION**

N° UNIQUE D'IDENTIFICATION [3, 5, 2, 5, 6, 7, 9, 8, 6]  
 IMMATRICULATION AU RCS DU GREFFE DE NANTERRE  
 AU RM DANS LE DEPT. DE

Dénomination / Sigle CARAT BRANC  
 Forme Juridique SAS  
 Siège ou 1er établissement en France pour les sociétés étrangères :  
 rés., btt., n°, voie, feux 4 PLACE DE SAVERNE  
 Code Postal 91214 Commune COURBEVOIE

**DECLARATION RELATIVE A LA MODIFICATION DE LA PERSONNE MORALE**

Désignation du centre des impôts où ont été déposées les dernières déclarations de résultats et de TVA  
 Date [2, 1, 7, 0, 6, 2, 1, 0, 3] Dénomination AEGIS MEDIA FRANC Sigle \_\_\_\_\_

Forme juridique \_\_\_\_\_  
 Société réduite à un associé unique  
 Durée de la personne morale [ ] [ ]  
 Date de clôture de l'exercice social [ ] [ ]  
 Nom commercial \_\_\_\_\_

Capital : montant, unité monétaire \_\_\_\_\_  
 Si capital variable : Montant minimum \_\_\_\_\_  
 Continuation de la société malgré un actif net inférieur à la moitié du capital social  
 Reconstitution des capitaux propres \_\_\_\_\_

Personnes morales ayant participé à l'opération :  
 Fusion  Scission. Cette opération entraîne  une augmentation de capital

Indiquer le liquidateur au cadre 15. Dans le cas de fermeture d'établissements, remplir cadre 8

Adresse de liquidation :  siège  adresse du liquidateur  autre : \_\_\_\_\_

Date de parution [ ] [ ] [ ] [ ] [ ] [ ]

DEPOT N° \_\_\_\_\_

10 JUL 2003  
 Greffe sur infocadreur M  
 GREFFE TRIBUNAL DE  
 COMMERCE DE NANTERRE

**DECLARATION RELATIVE A UN ETABLISSEMENT**

Cette demande concerne  UNE OUVERTURE  UNE MODIFICATION  UN TRANSFERT  UNE MISE EN LOCATION GERANCE  UNE FERMETURE

**ETABLISSEMENT TRANSFERE OU FERME**

POUR UN TRANSFERT : Destination  Fermé  Vendu  Autre \_\_\_\_\_  
 Si maintien d'une activité, de ce fait, l'établissement est :  Siège  Principal  Secondaire

POUR UNE FERMETURE : Destination  Supprimé  Vendu  Autre \_\_\_\_\_  
 Si cessation d'emploi de tout salarié : date [ ] [ ] [ ] [ ] [ ] [ ]

**ETABLISSEMENT CREE OU MODIFIE**

ADRESSE : rés., btt., app., étage, n°, voie, lieu dit \_\_\_\_\_  
 Code postal [ ] [ ] [ ] [ ] Commune \_\_\_\_\_

Code postal [ ] [ ] [ ] [ ] Commune \_\_\_\_\_

Contrat de domiciliation : Nom du domiciliataire \_\_\_\_\_  
 N° unique d'identification [ ] [ ] [ ] [ ] [ ] [ ]

Présence de salariés  oui  non  
 Il devient  Principal  Secondaire (seulement si changement de nature).  
 POUR UN ETABLISSEMENT CREE :  Siège  Siège - Etablissement principal  
 Etablissement principal  Etablissement secondaire, dans ce cas, est-il permanent  
 et dirigé par une personne ayant le pouvoir de lier des rapports juridiques avec les tiers  oui  non

TRADEMARK

REEL: 002800 FRAME: 0280

Translation certified true to the original. C. PERROT, duly sworn translator to the  
Toulouse Court of Appeal - FRANCE

M2 N° 1482701

STATEMENT OF CHANGE

G9251 824226 4

CORPORATE ENTITY

Statement received on:

- Name, legal form, registered capital
- Head office transfer
- Statement relating to an establishment: (opening, change, trading lease, closing)
- Resumption of business activities
- Dissolution of partnership

Boxes 1, 2, 17, 18 AND THE NEW OR MODIFIED ITEMS and an indication of the date of the event ARE COMPULSORY

RESTATEMENT OF IDENTITY PRIOR TO CHANGE

SINGLE IDENTIFICATION NUMBER 3 522 67 9 8 6

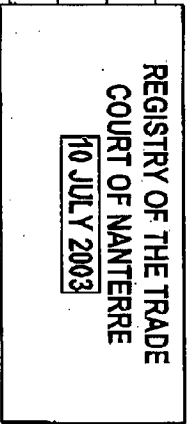
- REGISTERED IN THE TRADE AND COMPANIES REGISTER OF NANTERRE
- REGISTRATION IN THE TRADE DIRECTORY OF THE DEPARTMENT OF THE
- Trade count Registry of secondary registrations(s)

Company name / Logo: CARAT FRANCE  
 Legal form: SAS JOINT STOCK COMPANY (governed by a SUPERVISORY BOARD & DIRECTORATE)  
 Registered office of 1<sup>st</sup> French establishment for foreign companies:  
 Address: 4 PLACE DE SAVERNE  
 Post code: 92400 Cite: COURBEVOIE

STATEMENT RELATIVE TO THE CHANGE IN THE CORPORATE ENTITY

2 7 0 6 2 0 0 3 COMPANY NAME AEGIS MEDIA FRANCE

- Merger
- Split This operation involves a capital increase
- Corporate entity having participated in the operation:



Legal form:  Company reduced to a single partner

Lifetime of entity: \_\_\_\_\_

End of financial year: \_\_\_\_\_

Trading name: \_\_\_\_\_

Capital amount currency unit: \_\_\_\_\_

If variable capital: Minimum amount \_\_\_\_\_

Continuation despite net assets falling below one half registered capital

Reconstitution of equity capital

Dissolution: \_\_\_\_\_

Name of legal publication: \_\_\_\_\_ Date: \_\_\_\_\_

Liquidation address:  Head Office  Liquidator's address  Other \_\_\_\_\_

STATEMENT RELATIVE TO AN ESTABLISHMENT

This application relates to  AN OPENING  A CHANGE  A TRANSFER  OPERATING ON A TRADING LEASE BASIS  A CLOSING

FOR MER ESTABLISHMENT:  Head office  Main place of business

FOR A TRANSFER: Destination  Closed down  Sold  Other \_\_\_\_\_

Address: (if different to box 2) \_\_\_\_\_

FOR BUSINESS ACTIVELY MAINTAINED, the establishment consequently becomes  Head office  Main office  Secondary

Post code \_\_\_\_\_ City \_\_\_\_\_

FOR A CLOSING: Destination  Shut down  Sold  Other \_\_\_\_\_

Date \_\_\_\_\_

If all employees have been laid off, date: \_\_\_\_\_

ADDRESS \_\_\_\_\_

FOR CHANGED ESTABLISHMENTS: Employees present  yes  no

Post code \_\_\_\_\_

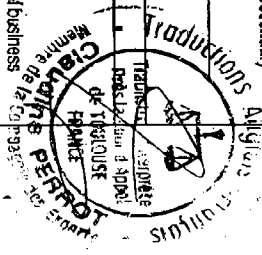
FOR ESTABLISHMENTS CREATED: Employees present  Head offices  Head Office - Main place of business

Business hosting contract: \_\_\_\_\_

it consequently becomes  Main office  Secondary (only if company type changes)

Fixed business address \_\_\_\_\_

person with the power to enter into legal relations with 3<sup>rd</sup> parties?  yes  no



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**Activity(ies): The acquisition, holding and transfer of all holdings and equity**  
Indicate the most important activities  
Specify type of business activity by checking one box only

Type  Retail trade  Transport  Services  Import/Export  
 Wholesale or middleman  Manufacture or production  Import/Export  
 Furnished rentals  Ass. installation  Repairs  Building/ Pub. Works  
 Excavation  Other \_\_\_\_\_

Place of business  Store (retail, M2)  Offices, practice  Market stall  
 Customers premises  Factory  Workshop  Depot, warehouse  
 Building site  Mine, quarry  Other \_\_\_\_\_

Does the main activity of this establishment become the company's main business activity?  yes  no  
 If activity is changed, this is subsequent to:  
 addition of a new activity  partial cessation of an activity due to:  Disappearance  Sale  Takeover  Other \_\_\_\_\_  
 Sign \_\_\_\_\_

Date \_\_\_\_\_

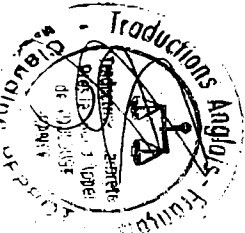
Address: Establishment  Main  Secondary  
 Trade lease Manager, Surname, names/company name \_\_\_\_\_  
**FOR SARL COMPANIES (LIMITED LIABILITY COMPANIES) COMPANY STATEMENT In addition to the TNS form for majority partners - single partners**  
 MANAGEMENT MODE IS CHANGED  yes  no If yes, it is now \_\_\_\_\_  
 MINORITY/EQUALITY  partnership with a company  yes  no  
 MAJORITY, if spouse is a partner and works without remuneration  yes  no

**STATEMENT RELATIVE TO THE MANAGER CONTD. on form M1 for severally and jointly liable partners**  
 FOR STATEMENTS OF CHANGE \_\_\_\_\_  
 CAPACITY \_\_\_\_\_  
 For trading companies, can the party concerned commit the company alone?  yes  no  
 Birth name / company name \_\_\_\_\_  
 Calling name \_\_\_\_\_ First names \_\_\_\_\_  
 Date of birth \_\_\_\_\_ Place \_\_\_\_\_ Nationality \_\_\_\_\_  
 Company name, legal form \_\_\_\_\_  
 Post code \_\_\_\_\_ City \_\_\_\_\_  
 For a corporate entity Place and registration number of \_\_\_\_\_

**ORIGIN FOR A COMMERCIAL OR CRAFT BUSINESS:**  
 If new business, go to next box  
 Purchase  Trade Lease  Other \_\_\_\_\_  
 Previous owner, single identification number \_\_\_\_\_  
 Birth name / company name \_\_\_\_\_ First names \_\_\_\_\_  
 Calling name \_\_\_\_\_  
 Purchase, contribution, legal announcement gazette, publication date \_\_\_\_\_  
 Name of gazette: \_\_\_\_\_ to \_\_\_\_\_  
 Trade lease, contract dated \_\_\_\_\_  
 Lessor of business, if different to previous owner? \_\_\_\_\_  
 Birth name / company name \_\_\_\_\_ First names \_\_\_\_\_  
 Calling name \_\_\_\_\_  
 Address/ha of office \_\_\_\_\_  
 Post code \_\_\_\_\_ City \_\_\_\_\_

**SALARIED PERSONNEL** In establishment of Date of recruitment \_\_\_\_\_  
 Total salaried manpower in company \_\_\_\_\_ of which \_\_\_\_\_ apprentices \_\_\_\_\_ Travelling sales staff \_\_\_\_\_  
 Employees present in company  yes  no

**TRADE LEASE**  
 Post code \_\_\_\_\_ City \_\_\_\_\_  
 TNS health insurance number \_\_\_\_\_ Dept. \_\_\_\_\_  
 Retirement fund \_\_\_\_\_  
 If manager is majority initially or following a change: Social security number \_\_\_\_\_  
**DIRECTING REPRESENTATIVE OF THE CORPORATE ENTITY (when provided for stationarity)**  
 For a change in representative  New  Departing, complete 1506  Change in personal status  
 Birth name / company name \_\_\_\_\_  
 Calling name \_\_\_\_\_ First names \_\_\_\_\_  
 Date of birth \_\_\_\_\_ Place \_\_\_\_\_ Nationality \_\_\_\_\_  
 Company name, legal form \_\_\_\_\_  
 Post code \_\_\_\_\_ City \_\_\_\_\_  
 WITHDRAWING Surnames, first names, calling names/ company name and legal form \_\_\_\_\_



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**ADDITIONAL INFORMATION**

OBSERVATIONS: Tax system: Rea normal

Correspondence address  Stated in box No 2  Other

Post code

City

Telephone

Fax / e-mail

This document constitutes an request for a change in the TRADE AND COMPANY REGISTER, or in the TRADE DIRECTORY and is also a statement to the tax authorities, social security, INSEE statistics organisation and to the labour inspection if applicable. Any false information herein shall involve penal sanctions including imprisonment

- THE LEGAL REPRESENTATIVE
- REPRESENTATIVE with power of attorney
- OTHER PERSON

sumama, name / domiciliation and address  
LE PUBLICATEUR LEGAL 11 RUE LOUISE  
THULEZ 75019 PARIS NREF 006300360R/C

Hereby certify that the above information is correct

Domic in PARIS  
Date 07/07/2003  
Number of dividers

10 DEC 2003

SEAL OF THE TRADE COURT OF NANTERRE  
EXCERPT OF THE MINUTES OF THE REGISTRY OF THE  
TRADE COURT OF NANTERRE

Sign each sheet separately

Translation certified  
true to the original deed  
No 44/2004 - Toulouse, 03.12.2004  
- NE VARIETUR -

