

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2007

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

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2. Exact	ame of the limited liability company						
CLEA	AR CHANNEL	TAXI MEDIA LI	LC_				
	4. Brief description of the character of the business which is actually conducted in Rhode Island						
	TAXI TOP A	DVERTISING					
5. Principal office address			City		State		Zip
200 EAST BASSE ROAD			SAN	ANTONIO	TX		78209-8328
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME Contact Name HENRY PARDO			OR TITLE OF CONTACT PERSON: Contact Title				
Street Address			City	·····	State	****	Zip
SSE 1	ROAD		SAN	ANTONIO	TX		78209-8328
ess of	EACH MANAGER O	F THE LIMITED LIABI	LITY C	OMPANY, IF APPLICAB	LE - DO N	OT LIST	MEMBERS
Manager Name		Manager Name					
t Address		Street Address					
	State	Zip	City	.,	State		Zip
••••••	Manager Name		•••••••••••••••••••••••••••••••••••••••	***************************************			
			Street Ad	ldress	-		3
	State	Zip	City	•	State	,	Zip
			require Address	filing of Ferm 642 - 1	 R.I.G.L721	611	
		Manager Name Street Address Zip City State Zip D-DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11 Address MPANY City Zip					
222 JEFFERSON BOULEVARD, SUITE 200			WARWICK 02		02888)2888	
	SSE I	CLEAR CHANNEL 4 Brief description of the TAXI TOP A SSE ROAD SS OF LIMITED LIABILITY OF THE STATE STATE State State STATE SERVICE COMPAN	TAXI TOP ADVERTISING SSE ROAD SS OF LIMITED LIABILITY COMPANY AND NAME SSE ROAD ESS OF EACH MANAGER OF THE LIMITED LIABILITY SPACES BEFORE USING ATTA State State Zip State Zip IN RHODE ISLAND DO NOT ALTER - Changes SERVICE COMPANY	CLEAR CHANNEL TAXI MEDIA LLC 4 Brief description of the character of the business which is actual TAXI TOP ADVERTISING City SSE ROAD SOF LIMITED LIABILITY COMPANY AND NAME OR TIT Contact City SSE ROAD SSES OF EACH MANAGER OF THE LIMITED LIABILITY CA FILL IN SPACES BEFORE USING ATTACHMENT Manage Street Actual State Zip City Manage Street Actual State Zip City City TN RHODE ISLAND - DO NOT ALTER - Changes require Address SERVICE COMPANY City	CLEAR CHANNEL TAXI MEDIA LLC 4. Brief description of the character of the business which is actually conducted in Rhode Island TAXI TOP ADVERTISING City SAN ANTONIO SS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERS Contact Title City SSE ROAD SAN ANTONIO SSES ROAD SAN ANTONIO ESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICAB FILL IN SPACES BEFORE USING ATTACHMENTS ('X' BOX FOR ATT Manager Name Street Address State Zip City Manager Name Street Address Street Address State Zip City IN RHODE ISLAND DO NOT ALTER - Changes require filing of Form 642 - 1 Address SERVICE COMPANY City	CLEAR CHANNEL TAXI MEDIA LLC 4. Brief description of the character of the business which is actually conducted in Rhode Island TAXI TOP ADVERTISING City SAN ANTONIO TX SOF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Title City State City State City State City State SAN ANTONIO TX STATE City State City State Street Address City State TN RHODE ISLAND DO NOT ALTER - Changes require filling of Form 642 - R.I.G.L. 7-1 Address SERVICE COMPANY City	CLEAR CHANNEL TAXI MEDIA LLC d. Brief description of the character of the business which is actually conducted in Rhode Island TAXI TOP ADVERTISING

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

VICE PRESIDENT, CLEAR CHANNEL OUTDOOR, MEMBER

Print or Type Name of Authorized Person