2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000004084

Name:

Address:

City-St-Zip:

RYAN, MARK P

1217 ORANGE ISLE

FORT LAUDERDALE, FL 33315

Entity Name: GRANT BROADCASTING SYSTEM IL INC

FILED Jun 07, 2007 Secretary of State

Littly Na	IIIE. GRANI	BROADCASTING STSTEWN,	INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	LE RIVER DF JDERDALE,	RIVE, SUITE 409 FL 33303			
Current Mailing Address:			New Mailing Address:		
	LE RIVER DF JDERDALE,	RIVE, SUITE 409 FL 33303			
FEI Number	: 65-0419403	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
1200 SOU PLANTAT The above	PORATION S TH PINE ISL ION, FL 333 named entity of Florida.	AND ROAD 24 US	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI		onic Signature of Registered Ac		 Date	
Election Car	ce with s. 607.	193(2)(b), F.S., the corporation did r ng Trust Fund Contribution ().	not receive the prior notice.	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GRANT, MILT 915 MIDDLE) Delete ON RIVER DRIVE, STE. 409 DALE, FL 33303	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GRANT, MILT 915 MIDDLE) Delete ON RIVER DRIVE, STE. 409 DALE, FL 33303	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title:	AS () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: MARK P. RYAN AS 06/07/2007