
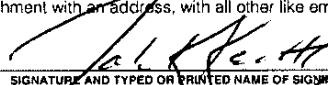


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2005 8:00 am
Secretary of State

05-05-2005 90083 048 ***150.00

DOCUMENT # F94000003546			
1. Entity Name SATELLITE DATA BROADCAST NETWORKS, INC.			
Principal Place of Business ATTN: TAX DEPT 6TH FLOOR 50 ROCKEFELLER PLAZA NEW YORK, NY 10023 US		Mailing Address ATTN: TAX DEPT 6TH FLOOR 50 ROCKEFELLER PLAZA NEW YORK, NY 10023 US	
2. Principal Place of Business 450 West 33rd Street Suite, Apt. #, etc.		3. Mailing Address 450 West 33rd Street Suite, Apt. #, etc. ATTN: TAX DEPT	
City & State New York, NY		City & State New York, NY	
Zip 10001	Country USA	Zip 10001	Country USA
6. Name and Address of Current Registered Agent WALSH, KEVIN 9100 N.W. 36TH STREET MIAMI, FL 33178-2420		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C OSBORNE, BURL 400 S RECORD ST DALLAS, TX 75202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WILLIAMS, JAMES R 1207 DAVISWOOD DR MC LEAN, VA 22102 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President James R. Williams, III 450 West 33rd Street New York, NY 10001 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRVP BRETTINGEN, THOMAS R 50 ROCKEFELLER PLAZA NEW YORK, NY 10020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Senior Vice President Thomas R. Brettingen 450 West 33rd St. New York, NY 10001 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CURLEY, THOMAS 50 ROCKEFELLER PLAZA NEW YORK, NY 10020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Thomas Curley 450 West 33rd Street New York, NY 10001 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRVP HARRIS, TOMMY J 50 ROCKEFELLER PLAZA NEW YORK, NY 10020 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KEITT, JOHN K JR. 50 ROCKEFELLER PLAZA NEW YORK, NY 10020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sr. V.P., General Counsel + Corp. Secretary JOHN K. Keitt Jr. 450 West 33rd Street New York, NY 10001 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Date: 4/25/05 Daytime Phone #: (212) 621-7510	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			