


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

05-05-2005 90083 048 \*\*\*150.00

<b>DOCUMENT # F94000003546</b> 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 Zip 10001 Country USA		City & State New York, NY Zip 10001 Country USA	
4. FEI Number 13-3099400		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		04222005 Chg-P CR2E034 (10/03)	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C OSBORNE, BURL 400 S RECORD ST DALLAS, TX 75202	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	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 BRETTEINGEN, THOMAS R 50 ROCKEFELLER PLAZA NEW YORK, NY 10020	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	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	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	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.			
<b>SIGNATURE:</b> <u>John K. Keitt Jr.</u> <u>4/25/05</u> <u>(212) 621-7510</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			