


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Mar 12, 2005 08:00 AM
Secretary of State**

DOCUMENT # J63559
1. Entity Name
RAINBOW SATELLITE COMMUNICATIONS, INC.



Principal Place of Business _____ Mailing Address _____
31717 PROGRESS RD. P. O. BOX 490395
LEESBURG, FL 34748 US LEESBURG, FL 34749 US

DO NOT WRITE IN THIS SPACE



02192005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2807645 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
WILKES, BRIAN J
31717 PROGRESS RD
LEESBURG, FL 34748

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IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD WILKES, BRIAN JACKSON 6839 TUSCAWILLA DRIVE LEESBURG, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D WILKES, ROBIN FRIEDRICH 6839 TUSCAWILLA DRIVE LEESBURG, FL |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Brian J Wilkes 2/23/05 352-326-8030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #