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Feb 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P29580 (8)

1. Corporation Name
RAINBOW ADVERTISING SALES CORPORATION

Principal Place of Business

Mailing Address

530 5TH AVENUE
6TH FLOOR
NEW YORK NY 10036
US

C/O CABLEVISION SYSTEMS
1 MEDIA CROSSWAYS
WOODBURY NY 11797-2062
US



3. Date Incorporated or Qualified
05/31/1990

3a. Date of Last Report
03/22/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

25 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES STREET SUITE 105
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME DOLAN, CHARLES F.
STREET ADDRESS ONE MEDIA CROSSWAYS
CITY-ST-ZIP WOODBURY NY

TITLE D ☐ DELETE

NAME LUSTGARTEN, MARC
STREET ADDRESS ONE MEDIA CROSSWAYS
CITY-ST-ZIP WOODBURY NY

TITLE D ☐ DELETE

NAME BELL, WILLIAM J.
STREET ADDRESS ONE MEDIA CROSSWAYS
CITY-ST-ZIP WOODBURY NY

TITLE EVPD ☐ DELETE

NAME RATNER, HANK J.
STREET ADDRESS 150 CROSSWAYS PARK DRIVE
CITY-ST-ZIP WOODBURY NY

TITLE P ☐ DELETE

NAME SINNES, KATHRYN
STREET ADDRESS 530 5TH AVENUE 6TH FLOOR
CITY-ST-ZIP NEW YORK NY

TITLE SVPT ☒ DELETE

NAME ROSENGARD, ANDREW
STREET ADDRESS 150 CROSSWAYS PARK DRIVE
CITY-ST-ZIP WOODBURY NY

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Sr.VP ☐ Change ☒ Addition

1.2 NAME Thomas Dolan
1.3 STREET ADDRESS One Media Crossways
1.4 CITY-ST-ZIP Woodbury, NY 11797

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 2/5/97 Daytime Phone: 251/97

CR2E034 (9/96)