

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 07 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P29580** (8)  
1. Corporation Name  
**RAINBOW ADVERTISING SALES CORPORATION**

Principal Place of Business

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

Mailing Address

C/O CABLEVISION SYSTEMS  
1 MEDIA CROSSWAYS  
WOODBURY NY 11797-2013  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/31/1990

4. FEI Number

11-2711741

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

24 9. Name and Address of Current Registered Agent

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

☐ DELETE

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

☐ DELETE

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

☐ DELETE

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

☐ DELETE

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

☒ DELETE

TITLE SVP  
NAME DOLAN, THOMAS  
STREET ADDRESS ONE MEDIA CROSSWAYS  
CITY-ST-ZIP WOODBURY NY

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Chairman ☐ Change ☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Vice Chairman ☐ 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 SVP & Secretary ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE P ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

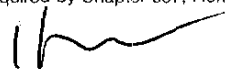
6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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:



CR2E034 (10/97)