


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2007 08:00 AM
Secretary of State

DOCUMENT # P34228 1. Entity Name CHRISTAL RADIO SALES, INC.	
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Principal Place of Business 125 W 55TH ST NEW YORK, NY 10019	Mailing Address 125 W 55TH ST NEW YORK, NY 10019
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DO NOT WRITE IN THIS SPACE



04242007 No Chg-P CR2E034 (11/05)

4. FEI Number 13-2618663	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

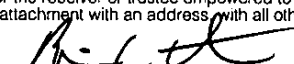
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	DATE 05/22/07-80024-001 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO OLDS, STUART O. 125 WEST 55TH ST. NEW YORK, NY 10019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS BELOYIANIS, JAMES E. 125 WEST 55TH STREET NY, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MAYS, LOWRY L 125 W 55TH ST NEW YORK, NY 10019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT WATSON, BRIAN 125 WEST 55TH STREET NEW YORK, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DAMON, ROBERT 125 W 55TH ST NEW YORK, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCOO MAYS, MARK P 125 W 55TH ST NEW YORK, NY 10019

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Watson

04/25/07

(212) 424-6882

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #