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**Mar 03 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 # S95370 (0)

**1. Corporation Name
RAINBOW BROADCASTING CO., INC.**



Principal Place of Business: 2000 UNIVERSAL PLAZA SUITE 200 ORLANDO FL 32819 US
Mailing Address: 2000 UNIVERSAL PLAZA SUITE 200 ORLANDO FL 32819-7806 US

3. Date Incorporated or Qualified: 11/20/1991
3a. Date of Last Report: 04/15/1996

2. Principal Place of Business (21) **2a. Mailing Address** (26)

4. FEI Number: 65-0300952
Applied For: Not Applicable

Suite, Apt #, etc. (22) Suite, Apt #, etc. (27)

5. Certificate of Status Desired: [] \$8.75 Additional Fee Required

City & State (23) City & State (28)

6. Election Campaign Financing Trust Fund Contribution: [] \$5.00 May Be Added to Fees

Zip (24) Country (25) Zip (29) Country (30)

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [X] Yes [] No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CORPORATION COMPANY OF MIAMI
1500 MIAMI CENTER
201 S. BISCAYNE BLVD.
MIAMI FL 33131**

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 (DELETE) **13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12** (Change) (Addition)

TITLE: DP (DELETE)
NAME: REY, JOSEPH
STREET ADDRESS: 6006 SHORELINE DRIVE
CITY - ST - ZIP: ORLANDO FL

1.1 TITLE (Change) (Addition)
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE: D (DELETE)
NAME: JARAMILLO, LETICIA
STREET ADDRESS: 5237 SPRING RUN AVENUE
CITY - ST - ZIP: ORLANDO FL

2.1 TITLE (Change) (Addition)
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE: (DELETE)
NAME:
STREET ADDRESS:
CITY - ST - ZIP:

3.1 TITLE (Change) (Addition)
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE: (DELETE)
NAME:
STREET ADDRESS:
CITY - ST - ZIP:

4.1 TITLE (Change) (Addition)
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE: (DELETE)
NAME:
STREET ADDRESS:
CITY - ST - ZIP:

5.1 TITLE (Change) (Addition)
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE: (DELETE)
NAME:
STREET ADDRESS:
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, changed, or on an attachment with an address.

SIGNATURE: *Joseph Rey* **JOSEPH REY** **2/20/97** **407 248 6500**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)