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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

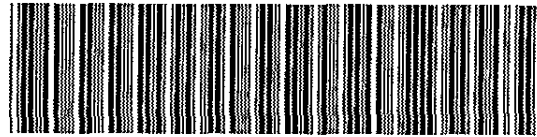
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TULSA, OKLA.

C8.11-9

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: INTEC SATELLITE, INC.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MILTON J. FIGUEROA, ESQUIRE

(Name of Person)

(Firm/Company)

499 N SR 434 SUITE 2113

(Address)

ALTAMONTE SPRINGS FL 32714

(City/State and Zip code)

For further information concerning this matter, please call:

MILTON J FIGUEROA

(Name of Person)

at (407) 745-0893

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☒ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. **INTEC SATELLITE, INC.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **PUERTO RICO**

(State or country under the law of which it is incorporated)

3. **60-0547961**

(FEI number, if applicable)

4. **05/18/2004**

(Date of incorporation)

5. **PERPETUAL**

(Duration: Year corp. will cease to exist or "perpetual")

6. **N/A**

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **5327 WILLIAMSPORT DR., ORLANDO FL 32821**

(Principal office address)

5327 WILLIAMSPORT DR., ORLANDO FL 32821

(Current mailing address)

8. **ANY AND ALL LAWFUL BUSINESS**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **JOAQUIN GUZMAN**

Office Address: **5327 WILLIAMSPORT DR.**

ORLANDO

(City)

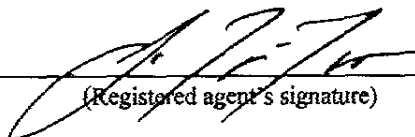
Florida 32821

(Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: JOAQUIN GUZMAN

Address: 5327 WILLIAMSPORT DR., ORLANDO FL 32821

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: JOAQUIN GUZMAN

Address: 5327 WILLIAMSPORT DR., ORLANDO FL 32821

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. JOAQUIN GUZMAN

(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

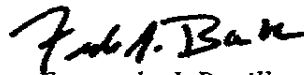


**COMMONWEALTH OF PUERTO RICO
DEPARTMENT OF STATE
SAN JUAN, PUERTO RICO**

I, FERNANDO J. BONILLA, Secretary of State of the Commonwealth of Puerto Rico,

CERTIFY: *That pursuant to the provisions of the Article 15.01 of the General Corporation Law of 1995, "INTEC SATELLITE INC.", file number 143,887, a profit corporation, organized under the laws of Puerto Rico, has complied with the filing of Annual Reports; therefore, it is in good standing.*

IN WITNESS WHERE OF, *I sign the present and cause to be affixed on it the Great Seal of the Commonwealth of Puerto Rico, in the City of San Juan, today, November first, of the year two thousand and six.*


Fernando J. Bonilla
Secretary of State

GFR/bmc
H-13843439
\$10.00

Certification of the Annual Reports officer

I hereby certify that I have read and revised the aforementioned corporate record and that it complies with chapter XV, Article 15.01 of the General Corporations Law.

1-Nov-06 B. M...
Date Annual Reports Officer