

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H70462

FILED  
Feb 19, 2010  
Secretary of State

**Entity Name:** TOTAL SATELLITE SYSTEMS INC.

**Current Principal Place of Business:**

12625 SW 9 PL.  
DAVIE, FL 33325 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 550521  
FT LAUDERDALE, FL 333550521 US

**New Mailing Address:**

12625 SW 9 PL.  
DAVIE, FL 33325 US

**FEI Number:** 59-2599502

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RIVEST, CELINE  
12625 SW 9TH PL  
DAVIE, FL 33325 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: RIVEST, CELINE  
Address: 12625 SW 9TH PL  
City-St-Zip: DAVIE, FL 33325

Title: S  
Name: RIVEST LEVESQUE, TATIANA  
Address: 12625 SW 9TH PL  
City-St-Zip: DAVIE, FL 33325

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** CELINE RIVEST

PRES

02/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date