2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

STREET ADDRESS CITY - ST-ZIP

SIGNATURE:

Apr 27, 2005 08:00 AM Secretary of State DOCUMENT # L01000000817 1. Entity Name QUALITY SATELLITE SERVICE, LLC Principal Place of Business Mailing Address 2572 EMERSON DRIVE PALM BAY, FL 32909 PO BOX 100231 PALM BAY, FL 32910-0231 01172005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3694607 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ENLOW, JOHN DENNIS DO NOT WRITE 2572 EMERSON DRIVE PALM BAY, FL 32909 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. me of registered egent and title if applicable Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE MGRM ENLOW, JOHN DENNIS NAME STREET ADDRESS 2572 EMERSON DR PALM BAY, FL 32909 CITY-ST-ZIP TITLE NAME 04/27/05-80140-00\$ 50.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

11. 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 report is per and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED

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