

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000051710

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** NILE SATELLITE SERVICE LLC

**Current Principal Place of Business:**

3180 NW 122 ND AVE  
SUNRISE, FL 33323

**New Principal Place of Business:**

3349 NW 101 AVE  
SUNRISE, FL 33351

**Current Mailing Address:**

3180 NW 122 ND AVE  
SUNRISE, FL 33323

**New Mailing Address:**

3349 NW 101 AVE  
SUNRISE, FL 33351

**FEI Number:** 77-0685129

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KASEM, ASHRAF H  
3180 NW 122 ND AVE  
SUNRISE, FL 33323 US

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

KASEM, ASHRAF H  
3349 NW 101 AVE  
SUNRISE, FL 33351 US

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:

04/30/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: SR  
Name: KASEM, ASHRAF H  
Address: 3349 NW 101 AVE  
City-St-Zip: SUNRISE, FL 33351 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: ASHRAF H KASEM

MGR

04/30/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date