
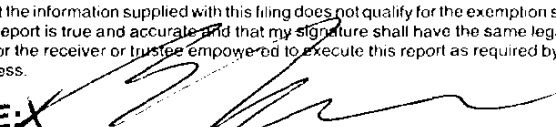


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 MAR 12 PM 12:33	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # L95000000673		1a. Principal Place of Business Address	
AVALON SATELLITE PROGRAMMING, L.C. 4343 COMMERCE CT., #621 LISLE IL 60532				800 CORPORATE DR., STE. 408 FT. LAUDERDALE FL 33334	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
800 CORPORATE DR.		Same As #1.		09/01/1995	
Suite, Apt. #, etc. 408		Suite, Apt. #, etc.		3a. State of Formation	
City & State FT. LAUDERDALE FL		City & State		FL	
Zip 33334		Country USA		4. FEI Number	
				65-0612519	
				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Date of Last Report	
				03/09/1998	
				6. Certificate of Status Desired	
				<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office			
KAZMA, MICHAEL D 800 CORPORATE DR., STE. 408 FT. LAUDERDALE FL 33334		Name			
		Street Address (P.O. Box Number is Not Acceptable)			
		Suite, Apt. #, etc.			
		City			
		FL			
		Zip Code			
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.					
SIGNATURE _____ DATE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent Signature is required when changing office)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	KAZMA, MICHAEL D	800 CORPORATE DR., STE. 408		FT. LAUDERDALE FL	
MGR	KAZMA, GERALD J	800 CORPORATE DR., STE. 408 4343 COMMERCE CT. SUITE 621		FT. LAUDERDALE FL LISLE, ILLINOIS 60532	
000002806470--7 -03/15/99--01135--014 ****188.75 ****188.75					
11. 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 is true 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, and that my name appears in Block 10, or on an attachment with an address.					
SIGNATURE: 					
SIGNATURE AND TYPE OF PRINTED NAME OF OFFICER, MANAGER, OR MEMBER OF COMPANY					