## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P00000109438

Entity Name: LEAD SAT CORP.

FILED Jun 24, 2005 Secretary of State

1441 BRICKELL AVE 200 NE 2ND DRIVE 1400 HOMESTEAD, FL 33030

MIAMI, FL 33131

**Current Mailing Address: New Mailing Address:** 

1441 BRICKELL AVE 1441 BRICKELL AVE 1400 SUITE 1400 MIAMI, FL 33131 MIAMI, FL 33131

FEI Number: 65-1065701 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ROBERT ALLEN LAW 1441 BRICKELL AVE STE 1400 MIAMI, FL 33131

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

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

MARTINEZ, JORGE Name: Name: MARTINEZ, JORGE 1441 BRICKELL AVE STE 1400 C/O 1441 BRICKELL AVE STE 1400 Address: Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

Title: (X) Delete Title: () Change () Addition

MARTINEZ, JUAN A Name: Name: 1441 BRICKELL AVE STE 1400 Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip:

Title: Title: VS (X) Delete () Change () Addition MARTINEZ, ADRIANA

Name: Name: 1441 BRICKELL AVE STE 1400 Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip:

Title: SS (X) Delete Title: () Change () Addition

BONAVITA, UMBERTO Name: Name: Address: 1441 BRICKELL AVE STE 1400 Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JORGE MARTINEZ **DPS** 06/24/2005