## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000111500

Entity Name: SATELLITE ENGINEERING TEAM, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1650 NE 115 STREET 4747 NW 97 PL

#507 DORAL, FL 33178 US

MIAMI, FL 33181

MIAMI, FL 33181 US

Current Mailing Address: New Mailing Address:

1650 NE 115 STREET 4747 NW 97 PL

#507 DORAL, FL 33178 US MIAMI, FL 33181

FEI Number: 65-1060400 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:

RESTREPO, MARGARITA
1650 NE 115 STREET
STE 507

TRUJILLO, DIANA
4747 NW 97 PL
DORAL, FL 33178 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: DIANA TRUJILLO 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 VINUEZA, JAIME L
 Name:
 TRUJILLO, DIANA

 Address:
 1650 NE 115 ST, SUITE 507
 Address:
 4747 NW 97 PL

 City-St-Zip:
 MIAMI, FL 33181
 City-St-Zip:
 DORAL, FL 33178

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

 Name:
 RESTREPO, MARGARITA
 Name:

 Address:
 1650 NE 115 ST, SUITE 507
 Address:

 City-St-Zip:
 NORTH MIAMI, FL 33181 US
 City-St-Zip:

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

 Name:
 VINUEZA, JAÎMÉ L
 Name:

 Address:
 1650 NE 115 ST, SUITE 507
 Address:

 City-St-Zip:
 NORTH MIAMI, FL 33181 US
 City-St-Zip:

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

 Name:
 BERMUDEZ, CAMILO
 Name:
 BERMUDEZ, CAMILO

 Address:
 1650 NE 115 ST, SUITE 507
 Address:
 4747 NW 97 PL

 City-St-Zip:
 NORTH MIAMI, FL 33181 US
 City-St-Zip:
 DORAL, FL 33178 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DIANA TRUJILLO P 04/30/2009