


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000044417
 1. Entity Name
 DISH TODAY SATELLITE TONIGHT INCORPORATED



Principal Place of Business Mailing Address
 HOPE MOTTE HOPE MOTTE
 16220 37 DR 16220 37 DR
 WELLBORN, FL 32094 WELLBORN, FL 32094

DO NOT WRITE IN THIS SPACE



03242006 No Chg-P CR2E034 (11/05)
 4. FEI Number Applied For:
 09-3654987 Not Applic.
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 MOTTE, HOPE
 16220 37 DRIVE
 WELLBORN, FL 32094

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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

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO MOTTE, HOPE 16220 37 DRIVE WELLBORN, FL 32094
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES KEMPFERT, LUKE A PRESIDE 16228 37TH DRIVE WELLBORN, FL 32094
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC. KEMPFERT, MELISSA K SECRETA 9208 192ND ST WELLBORN, FL 32094
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRE SINEATH, MARGARET M TREASUR 5683 153RD ROAD LIVE OAK, FL 32060
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KEMPFERT, DAVID L VICE PR 16232 37TH DRIVE WELLBORN, FL 32094
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1100000482885
 04/11/06-80092-010 158.75

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Hope Motte 3-24-06 356963113