2008 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P02000063136 1. Entity Name SATÉLLITE 7, INC. Principal Place of Business Mailing Address **1820 S. VOLUSIA AVENUE** 1820 S. VOLUSIA AVENUE ORANGE CITY, FL 32763 ORANGE CITY, FL 32763

FILED Jan 24, 2008 08:00 A Secretary of State



No Chg-P

CR2E034 (11/05)

01192008

L	O NOI WRITE II	N I MIS SPA	J ⊑	4. FEI Numb 04-368			Applied For Not Applicable	
				5. Certificate	e of Status Desired		\$8.75 Additional Fee Required	
	6. Name and Address of Current Regis	tered Agent						
MARRO, DENNIS M 1820 S. VOLUSIA AVENUE ORANGE CITY, FL 32763			DO NOT WRITE IN THIS SPACE					
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								
	Signature, typed or printed name of registered agent and title	d applicable (NOTE; Registered	Agent egnesure	required when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIRECT	CTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P MARRO, DENNIS M 79 SPRING LAKE DRIVE DEBARY, FL 32713							
NAME STREET ADDRESS CITY-ST-ZIP	MARRO, MARIE M 79 SPRING LAKE DRIVE DEBARY, FL 32713				U000001	79230() -011 150.00	
TITLE		•			017 247 UD**(<u> </u>	.orr 120°00	
STREET ADDRESS : City-SI-ZIP				DO	NOT W	RIT	E	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SP	ACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							:	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							:	

12. Thereby certify that the information supplied with this filling 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:	Marie Mario	MARIEMARRO	1-19-0
	SIGNATURE AND TOTAL OR CONTROL WANT OF ALCOHOL		