2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095866

Entity Name: ALL SYSTEMS SATELLITE, INC.

FILED Jan 26, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

2683 ST. JOHNS BLUFF ROAD SOUTH, STE 137 JACKSONVILLE, FL 32246

Current Mailing Address: New Mailing Address:

2683 ST. JOHNS BLUFF ROAD SOUTH, STE 137 JACKSONVILLE, FL 32246

FEI Number: 06-1646057 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:

LEWIS, NELSON R

LEWIS, GLORIA C

2683 ST. JOHNS BLUFF ROAD SOUTH, STE 137 2683 ST. JOHNS BLUFF ROAD SOUTH, STE 137

JACKSONVILLE, FL 32246 US JACKSONVILLE, FL 32246 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: GLORIA LEWIS 01/26/2006

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: PRES (X) Change () Addition Name: LEWIS, NELSON R JR. Name: LEWIS, NELSON R JR.

Address: 2683 ST. JOHNS BLUFF ROAD SOUTH, STE 137 Address: 2683 ST. JOHNS BLUFF ROAD SOUTH, STE 137

City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32246

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

Name: Name: LEWIS, GLORIA C

Address: Address: 2683 ST. JOHNS BLUFF RD. SOUTH, STE 137

City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information supplied with this filing does not qualify for the 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: GLORIA LEWIS DIR 01/26/2006

Electronic Signature of Signing Officer or Director

Date