## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P02000095866

Entity Name: ALL SYSTEMS SATELLITE, INC.

FILED Oct 24, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

2683 ST. JOHNS BLUFF ROAD SOUTH, STE 137 8382 BAYMEADOWS ROAD, SUITE 4

JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32256

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

2683 ST. JOHNS BLUFF ROAD SOUTH, STE 137 8382 BAYMEADOWS ROAD, SUITE 4

JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32256

FEI Number: 06-1646057 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LEWIS, GLORIA C SCHIRER, JACK L 2683 ST. JOHNS BLUFF ROAD SOUTH, STE 137

9218 SAFÉRON COURT JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32257 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 C. LEWIS 10/24/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: LEWIS, RICK Name: SCHIRER, SUSAN L 2683 ST. JOHNS BLUFF ROAD SOUTH, STE 137 9218 SAFFRON COURT Address: Address:

City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32257

VΡ Title: VΡ Title: () Delete (X) Change ( ) Addition SCHIRER, JACK L Name: LEWIS, GLORIA C Name:

2683 ST. JOHNS BLUFF RD. SOUTH, STE 137 9218 SAFFRON COURT Address: Address: JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32257 City-St-Zip: City-St-Zip:

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

LEWIS, NELSON R Name: Name:

8382 BAYMEADOWS ROAD, SUITE 4 Address Address:

City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32256

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

LEWIS, GLORIA C Name: Name:

8382 BAYMEADOWS ROAD, SUITE 4 Address: Address:

City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32256

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.

VΡ SIGNATURE: JACK L. SCHIRER 10/24/2007