

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000102122

Entity Name: J & B SATELLITE, INC.

FILED
Apr 08, 2007
Secretary of State

Current Principal Place of Business:

9560 NE 110 AVE
BRONSON, FL 32621

New Principal Place of Business:

Current Mailing Address:

PO BOX 14894
BRONSON, FL 32621

New Mailing Address:

PO BOX 1494
BRONSON, FL 32621

FEI Number: 42-1604444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, JAMES D
9560 NE 110 AVE
BRONSON, FL 32621 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BROWN, JAMES D
Address: PO BOX 1484
City-St-Zip: BRONSON, FL 32621

Title: DST () Delete
Name: BROWN, SHIRLEY
Address: PO BOX 1484
City-St-Zip: BRONSON, FL 32621

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BROWN, JAMES D
Address: PO BOX 1494
City-St-Zip: BRONSON, FL 32621

Title: DST (X) Change () Addition
Name: BROWN, SHIRLEY
Address: PO BOX 1494
City-St-Zip: BRONSON, FL 32621

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: JAMES D. BROWN

PRES

04/08/2007

Electronic Signature of Signing Officer or Director

_____ Date