2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000151675

Entity Name: DIRECT DISH CONNECTIONS, INC.

FILED Feb 11, 2005 Secretary of State

Current Princip	pal Place of Business:	New Principal Place of Business

2851 NE 183TH STREET 351 S. CYPRESS RD

APT 1908 SUITE 307

AVENTURA, FL 33160 POMPANO BEACH, FL 33060 US

Current Mailing Address: New Mailing Address:

351 S. CYPRESS RD SUITE 307 2851 NE 183TH STREET

APT 1908

AVENTURA, FL 33160 US POMPANO BEACH, FL 33060 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

SPINA, GABRIEL G SPINA, GABRIEL G 2851 NE 183TH STREET 6055 NW 37 STREET **APT 1908** AVENTURA, FL 33160 US MIAMI, FL 33166 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: GABRIEL SPINA 02/11/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SPINA, GABRIEL G SPINA, GABRIEL G Name: Name: 2851 NE 183TH STREET, APT 1908 Address: 6055 NW 37 STREET #17 Address: City-St-Zip: AVENTURA, FL 33160 US City-St-Zip: MIAMI, FL 33166 US

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

Name: Name: LEDEZMA, JOEL D MR Address: Address: 5720 NW 60TH PLACE PARKLAND, FL 33067 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Ρ SIGNATURE: GABRIEL SPINA 02/11/2005