

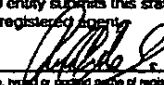
2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

2006 OCT 16 AM 11:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

DOCUMENT # P04000048691			
1. Entity Name SCIENTIFIC SATELLITE, INC.			
Principal Place of Business 10630 WASHINGTON STREET #209 PEMBROKE PINES, FL 33025		Mailing Address 10630 WASHINGTON STREET #209 PEMBROKE PINES, FL 33025	
2. Principal Place of Business 3019 SW 129th Terrace Suite, Apt. #, etc.		3. Mailing Address 3019 SW 129th Terrace Suite, Apt. #, etc.	
City & State Miramar, Florida		City & State Miramar, Florida	
Zip 33027	Country Broward	Zip 33027	Country Broward
4. FEI Number 20-0801421		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARRASCO, ROSA Y 10630 WASHINGTON STREET #209 PEMBROKE PINES, FL 33025		7. Name and Address of New Registered Agent Name: Carrasco, Rosa Street Address (P.O. Box Number is Not Acceptable) 3019 SW 129th Terrace City: Miramar FL Zip Code: 33027	
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: 		DATE: _____	
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPVS CARRASCO, ROSA 10630 WASHINGTON STREET #209 PEMBROKE PINES, FL 33025 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Carrasco, Rosa 3019 SW 129th Terrace Miramar, FL 33027 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CARRASCO, SANTOS E 10630 WASHINGTON ST #209 PEMBROKE PINES, FL 33025 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Carrasco, Santos 3019 SW 129th Terrace Miramar, FL 33027 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	700080875157 -10/45/06--01041--017--**158.75 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing 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: 		Date: _____ Daytime Phone #: _____	

10/20
aw