

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000079805 1. Entity Name SATELLITE SUPERCENTER INC.				FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 05 DEC 14 PM 12:23 REINSTATEMENT 05	
Principal Place of Business 375 HERONS RUN DR. #911 SARASOTA, FL 34232		Mailing Address 375 HERONS RUN DR. #911 SARASOTA, FL 34232			
2. Principal Place of Business 4653 72nd Ct E Suite, Apt. #, etc.		3. Mailing Address 4653 72nd Ct E Suite, Apt. #, etc.			
City & State Bradenton Florida Zip 34203		City & State Bradenton Florida Zip 34203			
4. FEI Number 81-0650407		Applied For <input type="checkbox"/> Not Applicable		10132005 REIN-P CR2E098 (6/04)	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent BURNS, JASON 375 HERONS RUN DR. #911 SARASOTA, FL 34232			7. Name and Address of New Registered Agent Name Daniela Rodriguez Street Address (P.O. Box Number is Not Acceptable) 4653 72nd Ct E City Bradenton FL Zip Code 34203		
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 <u><i>Daniela Rodriguez</i></u> President 12-12-2005 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$750.00 After January 1, 2006, Fee will be \$900.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BURNS, JASON <input type="checkbox"/> Delete 375 HERONS RUN DR. #911 SARASOTA, FL 34232		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. Daniela Rodriguez <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4653 72nd Ct E Bradenton FL 34203	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. Jason Burns <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4653 72nd Ct E Bradenton FL 34203	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	500062162583 <input type="checkbox"/> Change <input type="checkbox"/> Addition 12/14/05--01046--009 **750.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u><i>Daniela Rodriguez</i></u> 12-12-2005 9417519806 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					