


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000087645 1. Entity Name PFC SATELLITE LENDING CORP	
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Principal Place of Business 2601 BISCAYNE BOULEVARD MIAMI, FL 33137	Mailing Address 2601 BISCAYNE BOULEVARD MIAMI, FL 33137
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04102008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3014266	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent RODRIGUEZ, ANTONIO 2601 BISCAYNE BOULEVARD MIAMI, FL 33137

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MILLER, ROGER 2601 BISCAYNE BOULEVARD MIAMI, FL 33137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC RODRIGUEZ, ANTONIO 2601 BISCAYNE BOULEVARD MIAMI, FL 33137
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05/27/08-80081-003 150.00

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 an other like empowered.

SIGNATURE:  **4/09/08 576-6333**
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #