2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000073889

Entity Name: DIRECT SATELLITE TELEVISION SYSTEMS, INC.

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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11110 W OAKLAND PARK BLVD #267 11110 W OAKLAND PARK BLVD

SUNRISE, FL 33351 #267

SUNRISE, FL 33351

Current Mailing Address: New Mailing Address:

11110 W OAKLAND PARK BLVD #267 11110 W OAKLAND PARK BLVD SUNRISE, FL 33351

#267

SUNRISE, FL 33351

FEI Number: 26-4403938 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FELDMAN, DAVID FELDMAN, PRISCILLA 11110 W ÓAKLAND PARK BLVD #267 11110 W OAKLAND PARK BLVD #267

SUNRISE, FL 33351 SUNRISE, FL 33351 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: PRISCILLA FELDMAN 04/23/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

FELDMAN, DAVID FELDMAN, PRISCILLA Name: Name:

11110 W OAKLAND PARK BLVD #267 Address: 11110 W OAKLAND PARK BLVD #267 Address:

SUNRISE, FL 33351 City-St-Zip: SUNRISE, FL 33351 City-St-Zip:

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

Name: Name: FELDMAN, DAVID

Address: Address: 11110 W OAKLAND PARK BLVD #267

SUNRISE, FL 33351 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: PRISCILLA FELDMAN P/T 04/23/2009