## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 25, 2005 8:00 am **DOCUMENT # P93000052150 Secretary of State** 1. Entity Name ASTRO PROGRAMMING ENTERTAINMENT, INC. 01-25-2005 90055 011 \*\*\*150 00 12.00 Mailing Address Principal Place of Business . . . . . . . . 3100 N.W. 72ND AVE. 3100 N.W. 72ND AVE. ··· `# 109 ··· · MIAMI, FL 33122 MIAMI, FL 33122 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01222005 Chq-P CR2E034 (10/03) Applied For 4. FEI Number City & State City & State 65-0426264 Not Applicable Zin Zin. Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Nadia E. Johnson Street Address (P.O. Box Number is Not Acceptable) 3100 NW 72nd AVE #109 MENA, NADIA E. 5502 S.W. 144TH CT. MIAMI, FL 33175 City Miami 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 1/22/05 1. 1. 1. 1. 1. 1. 1. printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Election Campaign..... Trust Fund Contribution. FILE NOW!!! FEE IS \$150.00 \_Added to Fees After May 1, 2005 Fee will be \$550.00 .. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. DV TITLE · 🖸 Detete TITLE 3r Change Addition NAME MENA, NADIA E. NAME Nadia E. Mena 3100 NW 72nd AVE #109 Miami, FL 33122 5502 SW 114 CT STREET ADDRESS STREET ADDRESS CITY-ST-7IP MIAMI, FL 33175 CITY-ST-ZIP mı Change Detete TITLE ☐ Addition **BROWN, CANDIDE** NAME NAME Candide Brown 3100 NW 72nd Ave #109 Miami ,F1 33122 STREET ADDRESS 5502 SW 144 CT STREET ADDRESS CITY-ST-7IP MIAMI, FL 33175 CITY-ST-7IP x☐ Change TITLE \_\_\_ - Delete TITL F noitibhA 🔲 NAME SEVILLE, MARIE E. NAME Marie E Seville STREET ADORESS 5502 SW 144 CT STREET ADDRESS 3100 NW 72nd AVE #109 Miami. FL 33122 CITY-ST-ZIP MIAMI, FL 33175 CITY-ST-7IP mi e TITI F ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE Oelete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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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:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED FAME OF SIGNING OFFICER OR DIRECTOR