FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION** ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 12 1998 8:00am Secretary of State

1. Corporation	RSE SATELLITE, INC.	0019140 (0)				18 1878 1880 BY
Principal Place of Business		Mailing Address	•••			AN ANANA KARAH MANAN MANA ANDA
11398 W. FLAGER ST.		11398 W. FLAGER ST.				
207		207		DO NOT WRITE IN THIS	SPACE	
MIAMI FL 33174 US		MIAMI FL 33174			3. Date Incorporated or Qualified	OF AUE
03		US			· · · · · · · · · · · · · · · · · ·	
2. Principal I	Place of Business	2a, Mailing Address			03/11/1994 4, FEI Number	Applied For
21		26		65-0473213	Not Applicable	
Suite, Apt. #, otc		Suite, Apt #, etc.			\$8.75 Additional	
22		27			6, Certificate of Status Desired	Fee Required
City & State		City & State 28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the cu	
24	25 29		30			Yes No
g. Name and Address of Current Registered Agent			8	1 Name	10. Name and Address of New Registered	Agent
RODRIQUEZ, MIGUEL			l°	Name		
11398 W. FLAGER ST.			8	2 Street A	ddress (P.O. Box Number is Not Acceptable)	
SUITE 207			8	<u></u>	1	
MIAMI FL 33174			*	"		
			8	4 City	FL	85 Zip Code
. 11. Pursuant office or agent 1:					corporation submits this statement for the purpose or continuous board of directors. I hereby accept the appropriate the statement of the purpose of continuous conti	of changing its registered pointment as registered
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PD	☐ DELE1E	1.1 TITLE			☐ Change ☐ Addition
NAME	RODRIQUEZ, MIGUEL		1.2 NAM	E		
STREET ADDRESS	1		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	HIALEAH FL		1.4 CITY	- ST- ZIP		
TITLE	VPD	☐ DELETE	2.1 TITLE			Change Addition
NAME	LORENZO, ROLANDO		2.2 NAM	E		
STREET ADDRESS	11201 N. W. 7ST #A-204		2.3 STRE	ET ADDRESS		
CITY-ST-ZIP	MIAMI_FL		2. 4 City-St-ZiP			
TITLE	TD	☐ DELETE	3 1 TITLE			Change Addition
NAME	RODRIQUEZ, GRACIELA		3 2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP	HIALEAH FL	DELETE	3 4. CITY-ST-ZIP			Change Addition
TITLE		□ DECE IE	4.1 TITLE	1		Change Addition
NAME			4. 2 NAN	-		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY			Change Addition
TITLE	1	☐ Detell	5.1 TITLE			ET AIRUÑE ET VOOITION

plied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information formental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an I we receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in an attachment with an address

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE 6.2 NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

LORENZO UPD

DELETE

Addition