FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

APPROVED AND FILED

95 MAY -1 AM 8:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000092969 (2)**

1. Current Principal Place of Business:

SATELLITE OLE INC.

Principal Place of Business:
106-41 SW HAMMONDS BLVD
SUITE 315
MIAMI FL 33196

Mailing Address:
106-41 SW HAMMONDS BLVD.
SUITE 315
MIAMI FL 33196

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/22/1994**

3a. Date of Last Report:

2. New Principal Place of Business:
21 MIAMI FL
Suite, Apt. #, etc.: 22 SUITE 208
City & State: 23 MIAMI FL.
Zip: 24 33145 County: 25 DADE

2a. Mailing Address:
26 1801 CORAL WAY
Suite, Apt. #, etc.: 27
City & State: 28 FLORIDA
Zip: 29 Country: 30

4. FEI Number: 59-0545825

Applied For ☐
Not Applicable ☐

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Certified Copy (Additional Copies) ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under § 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

VILLABONA, RUTHY F
106-41 SW HAMMONDS BLVD.
SUITE 315
MIAMI FL 33196

10. Name and Address of New Registered Agent

81 Name:
82 Street Address: (P.O. Box Number is Not Acceptable)
83
84 City: **FL** 85 Zip Code:

11. Pursuant to the provisions of Section 607.0502 and 607.1908, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. Additions, Changes, Deletions (Check One)
Title	DPS	☐ Change ☐ Addition
Name	VILLABONA, RUTHY F	
Street Address	4871 NW 72ND AVE.	
City-St-Zip	LAUDERHILL FL 33311	
Title	DVT	☐ Change ☐ Addition
Name	SUAREZ, INES	
Street Address	106-41 SW HAMMONDS BLVD., SUITE 315	
City-St-Zip	MIAMI FL 33196	
Title		☐ Change ☐ Addition
Name		
Street Address		
City-St-Zip		
Title		☐ Change ☐ Addition
Name		
Street Address		
City-St-Zip		
Title		☐ Change ☐ Addition
Name		
Street Address		
City-St-Zip		
Title		☐ Change ☐ Addition
Name		
Street Address		
City-St-Zip		

14. I, the undersigned, do hereby certify that the information supplied with this report is true, complete 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 above, or on an attachment with an additional name.

SIGNATURE: R Villabona
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-26-95 (MS) 285 9999
Date Telephone Number

0001361 FP