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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000034738 (1)

TEL-VIA SATELLITE, INC.

Principal Place of Business

202 S.E. 4TH TERRACE

Mailing Address

202 S.E. 4TH TERRACE

## FILED Apr 30 1998 8:00am Secretary of State



197

DANIA FL 33004 DANIA FL 33004 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/03/1995 2. Principal Place of Business 4. FEI Number Applied For 12291 65-0582202 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State 6. Election Campaign Financing \$5,00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Browgi Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered 10. Name and Address of New Registered Agent Name MICCHIO, MIKE 202 S.E. 4TH TERRACE Street Address (P.O. Box Number is Not Acceptable) **DANIA FL 33004** SUNCISE 11. Pursuant to the provisions of Sections 607 0:02 and 607.1508, 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. Thereby accept the appointment as registered agent. Lam lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Change Addition 11 TITLE MICCHIO, MICHAEL NAME 1.2 NAME -202 S.S. 4TH TERRACE STREET ADDRESS 1.3 STREET ADDRESS DANIA EL 22004 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE NAME 2.2 NAME STREET ACCRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - S1 - ZIP DELETE TITLE Change 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELFTE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-21P 5.4 CITY-S1-ZIP TITLE DELETE 6.1 TITLE ☐ Change ☐ Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS 6.4 CITY - ST - ZIP 14. 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 annual report or supplemental annual report is frue 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 12 or Block 13 if changed, or on an attachment with an address.