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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 14 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P96000057001 (5)

SATCO	M SYSTEMS INC.				HI BANG BUN KANIK BANK BANK KANIK LAR
Principal Plac	ee of Business	Mailing Address			
7710 LAGO DEL MAR DRIVE STE. 504 WEST PALM BEACH FL 33433 7710 LAGO DEL MAR DRIVE STE. 504 WEST PALM BEACH FL 33433				DO NOT WRITE	IN THIS SPACE
}				3. Date Incorporated or Qualified	
ł				06/28/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0681257	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	See Regulred
City & Stat		City & State		6. Election Campaign Financing	\$5.00 May Be
	a Ration	28 BocaRat	~O^	Trust Fund Contribution	Added to Fees
Zip 24	Country 25		Country 30	This corporation owes or has pa Personal Property Tax due June	30. Yes No
	g, Name and Address of Curre	nt Registered Agent		10. Name and Address of New Re	glatered Agent
GROSS, ELISE 81 Name				3055 ELISE	
SOULE, LEAL &ASSOCIATES, P.A.				Address (P.O. Box Number is Not Acceptab	ole)
7471 W. OAKLAND PARK BLVD. STE. 110			Rest:	5 1710 LAGO DEL NAP	DA, SULTESOY
FT LAUDERDALE FL 33319					•
ļ			84 City		85 Zip Code
		· · · · · · · · · · · · · · · · · · ·	l Ba	oca Baton	- FL 33433
11. Pursuant office or r	to the provisions of Sections 607.05 registered agent, or both, in the State	02 and 607.1508, Florida Statutes e of Horida. Such change was au	s, the above-named Ithorized by the core	corporation submits this statement for the population's board of directors. I hereby acceptions	urpose of changing its registered
agent. La	im familiar with, and accept the oblig	gations of, Section 607.0505, Flor	ida Statutes.	solution a sound of all offices. Thorough according	A the appointment as regions of
SIGNATURE.	X Ouso Dio	~			
12.	Signature, typed or profind name of registered ag	yed and une if applicable (NOTE: ND DIRECTORS	Registered Agent signature		DATE
TITLE	P	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	GROSS, ELISE			VP	violige
STREET ADDRESS	7710 LAGO DEL MAR DRIVE	STE SOA	1.3 STREET ADDRESS	GROSS NATHAN 1710 Lago Del Har Di	c 4th 504
CHTY-ST-ZIP	WEST PALM BEACH FL 334		1.4 CITY-ST-ZIP	Boca Raton, FL	0 2002
TITLE		DELETE	21 TITLE	V TAGON	Change Addition
NAME	OROAS, NATHAN		22 NAME	`	
STREET ADDRESS	THIS DAGONOL MAR	DRIVE STE DOY	2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. C(TY-ST-Z(P		
TITLE		DELETE	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-ZIP			5.4 CITY-ST-7IP		
TITLE		DELETE	6.1 TITLE		Change Addition

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 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 12 or Block 13 if changed, or on an attachment with an address. D resident 3/10/00 001-447-9401 SIGNATURE:

62 NAME

6.3 STREET ADDRESS