

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000031886

FILED
Apr 25, 2003
Secretary of State

Entity Name: FUTURE VISION SATELLITE COMMUNICATIONS, INC.

Current Principal Place of Business:

13730 STATE RD 84 #173
DAVIE, FL 33325 US

New Principal Place of Business:

2400 WEST 84 STREET
SUITE 8
HIALEAH, FL 33016 US

Current Mailing Address:

14310 SW 14TH ST
DAVIE, FL 33325 US

New Mailing Address:

2400 WEST 84 STREET
SUITE 8
HIALEAH, FL 33016 US

FEI Number: 65-0780983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOCKHAUSEN, ANDREA
14310 SW 14 STREET
DAVIE, FL 33325 US

Name and Address of New Registered Agent:

STOCKHAUSEN, ANDREA
14310 SW 14 STREET
DAVIE, FL 33325 US

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.

SIGNATURE: ANDREA STOCKHAUSEN

04/25/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: STOCKHAUSEN, ANDREA
Address: 14310 SW 14TH ST
City-St-Zip: DAVIE, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VTS (X) Change () Addition
Name: STOCKHAUSEN, ANDREA
Address: 14310 SW 14TH ST
City-St-Zip: DAVIE, FL 33325

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 address, with all other like empowered.

SIGNATURE: ANDREA STOCKHAUSEN

VTS

04/25/2003

Electronic Signature of Signing Officer or Director

Date