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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000082787

SATELLITE INDUSTRIES, INC. Mailing Address Principal Place of Business 249 POINCIANA DR. 249 POINCIANA DR. INDIAN HARBOUR BCH FL 32937 INDIAN HARBOUR BCH FL 32937 2a. Mailing Address 2. Principal Place of Business 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27 City & State City & State 23 28 Zip Country Zip Country 30 24 25 29

9. Name and Address of Current Registered Agent

## **FILED** Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90178 025 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Yes

Not Applicable

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Personal Property Tax.

9-3534051

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

09/17/1998

4. FEI Number

DOWLING, GEORGE T 249 POINCIANA DR. INDIAN HARBOUR BCH FL 32937			82 Street Address (P.O. Box Number is Not Acceptable)  83		
			84 City	FL 85 Zip Coo	
office or r	to the provisions of Sections 607.0502 and 607.15 egistered agent, or both, in the State of Florida. Su m familiar with, and accept the obligations of, Secti	ch change was aut	horized by the cori	d corporation submits this statement for the purpose of changing its re- poration's board of directors. I hereby accept the appointment as regis	gistered tered
SIGNATURE	Signature, typed or printed name of registered agent and title if applica	NOTE: R	enistered Agent signature	required when reinstating) DATE	[
12.	OFFICERS AND DIRECTOR		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12
TITLE	- 12 ma D	DELETE	1.1 TITLE	Change	Addition
	Sanding Greate Ti		1.2 NAME		
STREET ADORESS	Dowling George T. 249 Poinciana Dr.		1.3 STREET ADDRESS	3	
CITY-ST-ZIP	Indian Harbour Beh, FL :	32937	1.4 CITY-ST-ZIP		
TITLE	D. Jine College A CT	DELETE	2.1 TITLE	☐ Change	☐ Addition
NAME	Dowling, Collect A -1		2.2 NAME		{
STREET ADDRESS	Dowling, Colleen A ST 249 Poinciana Dr. Indian Harbour Bch FL.		2.3 STREET ADORESS	3	İ
CITY-ST-ZIP	Indian Harbour 13th FL.	2937	2.4 CITY-ST-ZIP		}
TITLE		DELETE	3.1 TITLE	Change	Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	3	
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	Change	Addition
NAME			4, 2 NAME		
STREET ADDRESS	·		4.3 STREET ADDRESS		
		•	4.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE	☐ Change	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	3	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	☐ Change	Addition
NAME		<del>-</del>	6.2 NAME		
STREET ADDRESS	[17] · 12] · 13]		6.3 STREET ADDRESS	3	1
	1+4,8% (1)		6.4 CITY-ST-ZIP		
CITY-ST-ZIP	ass, about the lessentian complied with this siling of	an not qualify for t		ed in Section 119.07(3)(i), Florida Statutes. I further certify that the info	rmation

81 Name

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, with all other like empowered.

SIGNATURE:

27 April 1999 (407)773-2084