2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 28, 2004 08:00 AM Secretary of State DOCUMENT # P98000082787 1. Entity Name SATÉLLITE INDUSTRIES, INC. Principal Place of Business Mailing Address 249 POINCIANA DR. 249 POINCIANA DR. INDIAN HARBOUR BCH, FL 32937 INDIAN HARBOUR BCH, FL 32937 04252004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3534051 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE DOWLING, GEORGE T 249 POINCIANA DR. INDIAN HARBOUR BCH, FL 32937 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE DOWLING, GEORGE T NAME 249 POINCIANA DR. STREET ADDRESS U00000134814 INDIAN HARBOUR BCH, FL 32937 CITY-ST-ZIP 04/28/04-80035-010 150.00_ ST TITLE DOWLING, COLLEEN A NAME STREET ADDRESS 249 POINCIANA DR. INDIAN HARBOR, FL 32937 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP IN THIS SPACE TITLE STREET ADDRESS CITY - ST- ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP MILE NAME STREET ADDRESS CITY - ST - ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

25 April 2004 321-773-208

FILED