2007 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # P98000082787

1. Entity Name SATELLITE INDUSTRIES, INC.



FILED Jul 10, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

249 POINCIANA DR.

INDIAN HARBOUR BCH, FL 32937 _

249 POINCIANA DR.

INDIAN HARBOUR BCH, FL 32937



07022007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3534051 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

DOWLING, GEORGE T 249 POINCIANA DR. INDIAN HARBOUR BCH, FL 32937

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	tions of registered agent.	purpose of changing its register	ed office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATORIES	Signature, typed or printed name of registered agent and file	a il applicable. (NOTE: Registere	d Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Finar Trust Fund Contribution.	ncing 🖂	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DIRE	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DOWLING, GEORGE T 249 POINCIANA DR. INDIAN HARBOUR BCH, FL 32937				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DOWLING, COLLEEN A 249 POINCIANA DR. INDIAN HARBOR, FL 32937				U00000768047 07/10/07-80030-006 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

STREET ADDRESS CITY-ST-ZIP

GEORGE T. D. J. J. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICIAR OR DIRECTOR

2 July 2007 321-773-2084

Daytime Phone #