

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90289 017 ***150.00

0317262 AV

DOCUMENT # P99000059571

1. Entity Name

SATELLNET GROUP, INC.



Principal Place of Business

**182 LAKE VIEW DRIVE
APT. 102
FORT LAUDERDALE FL 33326**

Mailing Address

**13501 SW 128TH STREET
STE 208
MIAMI FL 33186**

2. Principal Place of Business

11700 SW 2nd STREET

3. Mailing Address

Suite, Apt. #, etc.
APT. 203

Suite, Apt. #, etc.

City & State

PEMBROKE PINES FL

City & State

MIAMI FL 33186

Zip

33025

Country

Zip

33025

Country

4. FEI Number

65-0930471

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**IGLESIAS, ADOLFO E
12010 SW 97TH STREET
MIAMI FL 33186-2606**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **OD** ☐ Delete
NAME **ANGARITZ, LUIS F**
STREET ADDRESS **13501 SW 128TH STREETM SUITE 208**
CITY-ST-ZIP **MIAMI FL 33186**

TITLE **VD** ☐ Delete
NAME **PENALOSA, IVAN**
STREET ADDRESS **13501 SW 128TH STREETM SUITE 208**
CITY-ST-ZIP **MIAMI FL 33186**

TITLE **TD** ☒ Delete
NAME **ORDONEZ, JAIME**
STREET ADDRESS **13501 SW 128TH STREETM SUITE 208**
CITY-ST-ZIP **MIAMI FL 33186**

TITLE **TD** ☒ Delete
NAME **GIRALDO, CESAR**
STREET ADDRESS **13501 SW 128TH STREETM SUITE 208**
CITY-ST-ZIP **MIAMI FL 33186**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-JAN-2003 / 305-776-0427

Date

Daytime Phone #

CR2E034 (10/02)