FROM : Radio-Resultants, Inc. PHONE NO. : 561 220 4245

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 27, 2000 8:00 am
Secretary of State
06-02-2000 90002 020 ***150.00

DOCUMENT # P99000065234

1. Entity Name: National Satellite

Principal Place of Business / Mailing Address:
501 East Oakland Pk Blvd
Ft. Lauderdale, Fl 33334

2. Principal Place of Business | 3. Mailing Address
Suite, Apt. #, etc. | Suite, Apt. #, etc.
City & State | City & State
Zip | Country | Zip | Country

DO NOT WRITE IN THIS SPACE

4. FEI Number: 650937154 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent:
John Silvester
501 E. Oakland Pk Blvd.
Ft. Lauderdale, Fl 33334

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.

SIGNATURE ______
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: President NAME: John Silvester STREET ADDRESS: 501 E. Oakland Pk Blvd. CITY-ST-ZIP: Ft. Lauderdale Fl 33334	☐ Delete	TITLE: Sec. NAME: George Niarchos STREET ADDRESS: 501 E. Oakland Pk Blvd CITY-ST-ZIP: Ft. Lauderdale Fl 33334	☐ Change ☒ Addition
TITLE: V.P. NAME: Jeff Norton STREET ADDRESS: 501 E Oakland Pk Blvd. CITY-ST-ZIP: Ft. Lauderdale Fl 33334	☐ Delete	TITLE: Treas. NAME: Roger Miller STREET ADDRESS: 501 E. Oakland Pk. Blvd. CITY-ST-ZIP: Ft. Lauderdale, Fl 33334	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/99)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] John Silvester 4/28/00 954-568-5500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #