

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000086508

FILED
Jul 20, 2005
Secretary of State

Entity Name: SATELLITE BROADCASTING CORPORATION II

Current Principal Place of Business:

1330 GALLEON DRIVE
NAPLES, FL 341027712 US

New Principal Place of Business:

1307 BOSTON TWP. LINE RD.
RICHMOND, IN 47374 US

Current Mailing Address:

P.O. BOX 1826
NAPLES, FL 341061826 US

New Mailing Address:

PO BOX 1712
RICHMOND, IN 473751712 US

FEI Number: 59-3602907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOGEL, JAMES D
3936 TAMIAMI TRAIL NORTH
SUITE B
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CARLSON, GARRETT G SR.
Address: PO BOX 1826
City-St-Zip: NAPLES, FL 341061826

Title: D () Delete
Name: MELENDEZ, EDWIN
Address: PO BOX 1826
City-St-Zip: HOLLYWOOD, FL 33081

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CM () Change (X) Addition
Name: MOORE, AALN C
Address: 1307 BOSTON TWP. LINE RD.
City-St-Zip: RICHMOND, IN 47374 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALAN MOORE

CM

07/20/2005

Electronic Signature of Signing Officer or Director

Date