2008 FOR PROFIT CORPORATION

Apr 02, 2008 08:00 All Secretary of State **ANNUAL REPORT** DOCUMENT # S19590 VISTA SATELLITE COMMUNICATIONS, INC. Principal Place of Business Mailing Address 73-104 SW 12TH AVENUE 73-104 SW 12TH AVENUE US DANIA BEACH, FL 33004 US DANIA BEACH, FL 33004 01252008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 11-2945055 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LEIMER, ROY J DO NOT WRITE 73-104 SW 12TH AVENUE IN THIS SPACE DANIA BEACH, FL 33004 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, typed or printed name of registered agent and title if applicable (NQTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FiLE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. U00000877482 PD THLE 04/14/08-80016-009 150.00 LIEMER, ROY NAME 73-104 SW 12TH AVENUE STREET ADDRESS CITY-ST-ZIP DANIA BEACH, FL 33004 VPD TITLE LIEMER, GERI NAME STREET ADDRESS 73-104 SW 12TH AVENUE CITY-ST-ZIP DANIA BEACH, FL 33004 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY+ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 inclicated 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 of Block 11 if changed, or on an attachme

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

SIGNING OFFICER OR DIRECTOR

FILED