

# **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# S38855

**FILED**  
**Sep 04, 2012**  
**Secretary of State**

**Entity Name:** ASTRO SATELLITE OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

3100 NW 72ND AVE  
SUITE 109  
MIAMI, FL 33122

**New Principal Place of Business:**

**Current Mailing Address:**

3100 NW 72ND AVE  
SUITE 109  
MIAMI, FL 33122

**New Mailing Address:**

**FEI Number:** 65-0263955

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BROWN, MAYRA I  
3100 NW 72ND AVE  
SUITE 109  
MIAMI, FL 33122 US

**Name and Address of New Registered Agent:**

BOZA, ILEANA M  
3100 NW 72ND AVE  
SUITE 109  
MIAMI, FL 33122 US

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: ILEANA M BOZA

09/04/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: BOZA, ILEANA M  
Address: 3100 NW 72ND AVE #109  
City-St-Zip: MIAMI, FL 33122

Title: DV  
Name: BROWN, MAYRA I  
Address: 3100 NW 72ND AVE # 109  
City-St-Zip: MIAMI, FL 33122

Title: S  
Name: MENA, EFIGENIA  
Address: 3100 NW 72ND AVE #109  
City-St-Zip: MIAMI, FL 33122

Title: T  
Name: MENA, JOSE  
Address: 3100 NW 72 AVE #109  
City-St-Zip: MIAMI, FL 33122

I hereby 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 all other like empowered.

SIGNATURE: ILEANA M BOZA

DP

09/04/2012

Electronic Signature of Signing Officer or Director

Date