

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

| OMB APPROVAL | | | | |
|--------------------------|-----------|--|--|--|
| OMB Number: | 3235-0104 | | | |
| Estimated average burden | | | | |
| nours per response | | | | |

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| (Print or Type Responses) | | | | | | | | | |
|--|---|--|---------|--|--|-----------------|---|--|--|
| 1. Name and Address of Reporting Person* Cusimano Louis | 2. Date of Event Requiring Statement (Month/Day/Year) — 05/28/2021 | | · . | 3. Issuer Name and Ticker or Trading Symbol ORBSAT CORP [OSAT] | | | | | |
| (Last) (First) (Middle) C/O ORBSAT CORP., 18851 NW 29TH AVE, SUITE 700 | | | Issuer | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | 5. If Amendment, Date Original Filed(Month/Day/Year) | | |
| (Street) AVENTURA,, FL 33180 | | | | | Officer (give title Other (specify | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | |
| (City) (State) (Zip) | | Table I - Non-Derivative Securities Beneficially Owned | | | | | | | |
| 1. Title of Security (Instr. 4) | 2. Amount of Se Beneficially Own (Instr. 4) | | | ally Owned | 1 (| | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| Common Stock, par value \$0.0001 | | | | D | | | | | |
| Reminder: Report on a separate line for each class Persons who responding the form displayed the form displ | nd to the c | ollection | of info | ormation contain | ed in th | nis form are no | t required to res | SEC 1473 (7-02) | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | |
| (Instr. 4) | | | • | erivative | 4. Conversion or Exercise Price of Derivative Security | Form of | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| | Date Exercisable | Expiration Date | Title | Amount or Number Shares | er of | Security | (I) (Instr. 5) | | |

Reporting Owners

| | Relationships | | | | |
|---|---------------|--------------|---------|-------|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | |
| Cusimano Louis C/O ORBSAT CORP. 18851 NW 29TH AVE, SUITE 700 AVENTURA,, FL 33180 | X | | | | |

Signatures

| /s/ Louis Cusimano | 07/28/2021 |
|---------------------------------|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.