


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000000040 (2)
 1. Corporation Name
ITOCHU CABLE SERVICES INC.



Principal Place of Business 1143 W NEWPORT CTR DR DEERFIELD BCH FL 33442	Mailing Address 1143 W NEWPORT CTR DR DEERFIELD BCH FL 33442
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/03/1997	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 65-0709244	Applied For <input type="checkbox"/> Not Applicable
23 Zip	25 Country	28 Zip	30 Country	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
24		29		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP OHTSU, MASAKAZU 335 MADISON AVE NY NY 10017	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OHTSU, MASAKAZU	1.2 NAME	
STREET ADDRESS	335 MADISON AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	NY NY 10017	1.4 CITY-ST-ZIP	
TITLE	CEO OHTSU, MASAKAZU 335 MADISON AVE NY NY 10017	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OHTSU, MASAKAZU	2.2 NAME	
STREET ADDRESS	335 MADISON AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	NY NY 10017	2.4 CITY-ST-ZIP	
TITLE	S LAPTOOK, ERIC J 335 MADISON AVE NY NY 10017	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAPTOOK, ERIC J	3.2 NAME	
STREET ADDRESS	335 MADISON AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	NY NY 10017	3.4 CITY-ST-ZIP	
TITLE	D ONO. SHIGEJI 335 MADISON AVE NY NY 10017	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ONO. SHIGEJI	4.2 NAME	
STREET ADDRESS	335 MADISON AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	NY NY 10017	4.4 CITY-ST-ZIP	
TITLE	D MACFADYEN, SCOTT 335 MADISON AVE NY NY 10017	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MACFADYEN, SCOTT	5.2 NAME	
STREET ADDRESS	335 MADISON AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	NY NY 10017	5.4 CITY-ST-ZIP	
TITLE	D SUGUTA, HIROSHI 335 MADISON AVE NY NY 10017	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUGUTA, HIROSHI	6.2 NAME	
STREET ADDRESS	335 MADISON AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	NY NY 10017	6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ *3/1/98*

CR2E034 (10/97)