

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G69538

**Entity Name:** PACIFIC CABLE TELEVISION, INC.

**Current Principal Place of Business:**

1728 CORAL WAY  
SUITE 900  
MIAMI, FL 33145

**FILED**  
**Jan 15, 2020**  
**Secretary of State**  
**0219348220CC**

**Current Mailing Address:**

1728 CORAL WAY  
SUITE 900  
MIAMI, FL 33145 US

**FEI Number: 59-2456692**

**Certificate of Status Desired: No**

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

MURAIWALD BIONDO MORENO E BROCHIN  
2121 PONCE DE LEON BLVD  
SUITE 600  
CORAL GABLES, FL 33134 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           DIRECTOR, PRESIDENT  
Name           ISAIAS, LUIS N  
Address        1728 CORAL WAY  
                  SUITE 900  
City-State-Zip: MIAMI FL 33145

Title           DIRECTOR, VP  
Name           ISAIAS, ANDRES  
Address        1728 CORAL WAY  
                  SUITE 900  
City-State-Zip: MIAMI FL 33145

Title           DIRECTOR, VP  
Name           ISAIAS-ARELLANO, WILLIAM  
Address        1728 CORAL WAY  
                  SUITE 900  
City-State-Zip: MIAMI FL 33145

Title           VP, TREASURER, SECRETARY  
Name           MORLA, MARIA C  
Address        1728 CORAL WAY  
                  SUITE 900  
City-State-Zip: MIAMI FL 33145

*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: MARIA DEL CARMEN MORLA**

**VP**

**01/15/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date