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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT # 561912** 

(7)

ULTRACOM OF DADE COUNTY, INC.

Principal Place of Business Mailing Address							( albiği dirə bitar ilkin tölüt rindi		17887 WINEL WINII	81891 ( <b>4</b> 8)	
			C/O TWC TAX DEPT. PO BOX 6700								
STAMFORD CT	00302		ENGLEWOOD CO 80155-6700								
							1	Date Incorporated or Qualified		ate of Last R	eport
								03/13/1978	05/	01/1996	
2. Principal Pla	ace of Business	— ⊢¬ `	2a. Mailing Address				4.	FEI Number		— <del>— — —</del>	pplied For
21		26 Cuito	Suite, Apt. #, etc.					23-2060410			ot Applicable
Suite, Apt. ≢	F, BIG.	27 Suite,					5.	Certificate of Status Desired		<b>\$8.75</b> A	
City & State			City & State				R	Election Campaign Financing			May Be
23		28						Trust Fund Contribution			to Fees
Zιρ	Country	Zip		Cou	intry		8.	This corporation has liability fo	r intangible	tax under s	. 199.032,
24	25	29		30					☐ Yes		
	9. Name and Address of Curr	ent Registered A	gent				10.	Name and Address of New F	egistered	Agent	•
CT C	CORPORATION SYSTEM				61	Name					
	s. Pine Island Road				82	Street Add	iress (P.	O. Box Number is Not Accept	able)		
Plah	NTATION FL 33324							v			
					83						
					84	City			FL	85 Zip	Code
44 5	o the provisions of Sections 607.0	602 and 607 1606	L Florida Ctati	doo the e	bout	nomed one	poration	n automite this statement for the		d changing i	te registered
office or re	egistered agent, or both, in the Str	ate of Florida, Suc	h change was	authorize	d by	the corpora	poranor	n soomis this statement for the board of directors. I hereby acc	purpose c ep! the ap	pointment as	registered
agent Lar	m lamiliar with, and accept the ob	ligations of, Section	on 607.0505, F	lorida Sta	tutes						
SIGNATURE.	Stynarure, type ditor printed name of registeri di	agent and tile if applical	rie. (NC	TE Registere	d Age	nt signature requ	ired when	reinstating)	DATE		
12.	- varyer , ,	AND DIRECTORS		13.				ADDITIONS/CHANGES TO OFF	ICERS AN	DIRECTOR	RS IN 12
1)TLE	P/D	<del></del>	DELETE	1,1 ]	TLE					Change	Addition
NAME	HAJE, PETER			1.2 N	AME						
STREET ADDRESS	75 ROCKEFELLER PLAZA			1.3 S	TREET	ADDRESS					
COTY+S1+ZIF	NEW YORK NY 10019	,	.,	1.40	ITY-\$	T- ZIP					
TITLE	V/D		DELETE	2.1 T	ITLE					☐ Change	Addition
NAME	BRESSLER, RICHARD J.			2.2 N	AME						
STREET ADDRESS	75 ROCKEFELLER PLAZA			2.3 S	TREET	ADDRESS					
CITY - S1 - ZIP	NEW YORK NY 10019				CITY-9	T- ZIP				<b>1</b> 10	The care
THILE	V/D		☐ DELETE	3.1 7						☐ Change	Addition
NAME.	HAYS, SPENCER B.			3.2 N							
STREET ADDRESS	75 ROCKEFELLER PLAZA NEW YORK NY 10019					ADDRESS					
CHTY - S1 - ZIF	AEU IOUVIII IMIA		DELETE	4.1 3		iT-ZIP			<del></del>	Change	Addition
TRILE	ALLAMAN, GAIL L.		- DELETE	1	NAME					AusoriAc	L. J Addition
NAME STREET ADDRESS	5680 GREENWOOD PLAZA	BLVD.		1		ADDRESS					
CITY - ST - ZIF	ENGLEWOOD CO 80111			1	HTY-S	i i					
TITLE	AT		DELETE	511		, 411				☐ Change	Addition
NAME	HEFTY, LAURIE J.		****		IAME					-	
STREET ADDRESS	5680 GREENWOOD PLAZA	BLVD.				ADDRESS					
CITY - S1 - ZIP	ENGLEWOOD CO 80111				IIY-S						
TITLE	٧		DELETE	6.17	ITLE					Change	Addition
NAME	CHRISTIE, WARREN A.			6.21	AME						
STREET ADDRESS	1271 AVENUE OF THE AME	ERICAS		6.3 \$	IREET	ADORESS					
CHY-ST-ZIP	NEW YORK NY 10020				HTY-S			······································			****
14. I do hereb	by certify that the information support indicated on this annual report.	olied with this filing or supplemental a	does not qua nnual report is	alify for the true and	exe acci	mption state trate and the	ed in Se at my si	ection 119.07(3)(i), Florida Statu ignature shall have the same le	tes. I furth gal effect a	er certify that as if made ur	t the nder oath; that
l am an o	fficer or director of the corporation in Block 12 or Block 13 if changed	or the receiver of	r trustee empo	wered to	ехес	ute this repo	ort as re	equired by Chapter 607, Florida	Statutes	and that my	name
oppears i	The state of the s	/ A /	nonthill on o	GUITUGO.	l			. 1 4-			

Olaurie Hefty Asst. Treasurer

(303) 799-1200

**FILED** 

Feb 14 1997 8:00am

Secretary of State

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