

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 13 1998 8:00am  
Secretary of State

DOCUMENT # 653079 (4)  
1. Corporation Name  
NATIONAL SUBSCRIPTION TELEVISION OF FT. LAUDERDA  
LE INC.



Principal Place of Business Mailing Address  
C/O OAK INDUSTRIES INC C/O OAK INDUSTRIES INC  
1000 WINTER STREET 1000 WINTER STREET  
WALTHAM MA 02154 WALTHAM MA 02154

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

01/23/1980

4. FEI Number

95-3448337

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSD  
NAME HICKS, COLEMAN S  
STREET ADDRESS 1000 WINTER ST  
CITY-ST-ZIP WALTHAM MA ☐ DELETE

TITLE VTD  
NAME SHEEHAN, THOMAS F.  
STREET ADDRESS 1000 WINTER STREET  
CITY-ST-ZIP WALTHAM MA ☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D  
1.2 NAME Mela Lew  
1.3 STREET ADDRESS 1000 WINTER STREET  
1.4 CITY-ST-ZIP WALTHAM, MA 02154 ☐ Change ☒ Addition

2.1 TITLE VTD  
2.2 NAME RANDALL J. HYLEK  
2.3 STREET ADDRESS 1000 WINTER STREET  
2.4 CITY-ST-ZIP WALTHAM, MA 02154 ☐ Change ☒ Addition

3.1 TITLE VTD  
3.2 NAME PAUL A. LEBLANC  
3.3 STREET ADDRESS 1000 WINTER STREET  
3.4 CITY-ST-ZIP WALTHAM, MA 02154 ☐ Change ☒ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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. Paul A. LeBlanc

CR2E034 (10/97)