SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

Suite, Apt. #, etc.

City & State

F93000002682 (3)

NATIONAL MOBILE TELEVISION, INC.

Principal Place of Business	Mailing Address		
12698 GATEWAY DR.	12698 GATEWAY DR.		
SEATTLE WA 98168	SEATTLE WA 90160		
2. Principal Place of Business	2a. Mailing Address		

Suite, Apt. #, etc.

City & State

FILED Aug 03 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/04/1993 4. FEI Number

91-1535065

5. Certificate of Status Desired

6. Election Campaign Financing

23		28		Trust Fund Contribution		
Zip	Country	Ziρ	Country	8. This corporation owes or has paid the current year Intangible		
24	25	29	30	Personal Property Tax due June 30. Yes No		
	9. Name and Address of Curre		81 Name	10. Name and Address of New Registered Agent		
	CORPORATION SERVICE COMPANY			81 Name		
1201 HAYES STREET TALLAHASSEE FL 32301			82 Street Addr	82 Street Address (P.O. Box Number is Not Acceptable)		
			83			
			63			
			84 City	FL 85 Zip Code		
ornce or	t to the provisions of sections 607,050 registered agent, or both, in the State am familiar with, and accept the oblig	≟of Florida. Such change wa	s authorized by the corporation	ration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered		
SIGNATURE		·				
	Signature, typical or prodect name of registered age		(NOTE: Registered Agent signature requ			
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD CHECODO CTOVE	☐ DELETE	1.1 TITLE	Change Addition		
NAME	10000 CATDUAY DD		1.2 NAME			
STREET ADDRESS	12698 GATEWAY DR.		1.3 STREET ADDRESS	j		
CITY-ST-ZIP	SEATTLE WA	· · · · · · · · · · · · · · · · · · ·	1.4 CITY-ST-ZIP			
TITLE	D COTUCOS CUDIS	L_ DELETE	2 1 TITLE	Change Addition		
NAME	BROTHERS, CHRIS		2.2 NAME			
STREET ADDRESS	550 SOUTH HOPE STREET LOS ANGELES CA 90071		2 3 STREET ADDRESS			
CITY-ST-ZIP TITLE	D ANGELES CA 900/1	·	2.4 CITY-ST-ZIP	*		
NAME	KAPLAN, STEVE	L] DELETE	3.1 TITLE	Change Addition		
	550 SOUTH HOPE STREET		3.2 NAME			
STREET ADDRESS	LOS ANGELES CA 90071		3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	S ANGELES CA SOUT	· · · -	3.4 CiTY-ST-ZIP			
NAME	MARKLEY, DEBRA	[] DELETE	4.1 TITLE	Change Addition		
STREET ADDRESS	12698 GATEWAY DR.		4.2 NAME			
	SEATTLE WA 98168		4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	CENTILE WA SUIDO	Γ-1	4.4 CITY-ST-ZIP 5.1 TITLE			
NAME		L DELETE		80000251014 Change Addition		
STREET ADDRESS			5.2 NAME	-08/07/38010040 14		
			5.3 STREET ADDRESS	***550.00		
CITY-ST-ZIP TITLE		·- ·· · · · · · · · · · · · · · · · · ·	5.4 CITY-ST-ZIP 6.1 TITLE			
NAME		L_] DELETE		Change Addition		
STREET ADDRESS			6.2 NAME	PE		
1			63 STREET ADDRESS	1 F. 3		
City-St-ZiP			6.4 CITY-ST-ZIP	0 /		

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 attackment with an address.

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable