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

Y PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90199 003 ***150.00

DOCUMENT # A

1. Corporation Name USA CABLE CONNECTIONS, INC.													
Principal Place of Business Mailing Address							(1601)() east alate (1616 (1911 alati alati	(4181) B 1691	61811 B1811 B1811 1881				
2000 MAIN STREE P.O. BOX 1196 DUNEDIN FL 3469		2000 main street P.O. Box 1196 Dunedin Fl. 34697-8196				DO NOT WRITE IN THIS SPACE							
						3.	Date Incorporated or Qualifed 06/03/1983	_					
2. Principal Place	of Business	2a. Mailing Address	2a. Mailing Address				FEI Number		Applied For				
21 26							59-2306007		Not Applicable				
Suite, Apt. #; e	etc.	Suite, Apt. #, etc.					Certificate of Status Desired						
City & State		City & State				6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees					
Zip 24	Country 25	Zip	Coun	try		8.	This corporation owes the current year I Personal Property Tax.	ntangible Ýes	□No				
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent							
MULLE	R, CARMINE J.		1	81	Name								
1330 BELCHER DRIVE				82	Street Addres	s (P	O. Box Number is Not Acceptable)						
TARPON SPRINGS FL 34688			. [83					, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
1			1	84	City		F	85	Zip Code				

IAN	PUN SPRINGS FL 34000			•	83									
				}	84	City					FL	85	Zip Co	ode
office or re	to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the	State of Florida, Suc	h change was auth	norized	by t	the corpo	corporation ration's bo	submits t ard of dire	his statem ctors. I he	ent for the reby acce	purpose of pt the appo	changi intment	ng its regi	egistered stered
SIGNATURE	Signature, typed or printed name of regist	ered agent and title if applicab	ile. (NOTE: Ro	egistered /	Acent	signature n	quired when re	instating)			DATE			
12.		RS AND DIRECTORS		13.	<u> </u>	<u> </u>			S/CHANG	ES TO OF	FICERS A	ND DIR	ECTOR	S IN 12
rme T	PD		DELETE	1.1 TITI	Æ							Ch	ange	Addition
NAME	MULLER, CARMINE			1.2 NA	ME	l			•					
STREET ADDRESS	1330 BELCHER DRIVE			1.3 STF	REET.	ADDRESS					-			
CITY-ST-ZIP	TARPON SPRINGS FL			1.4 CIT	Y-ST	-ZIP								
TITLE			DELETE	2.1 TIT								☐ Ch	ange	Addition
NAME				2.2 NA	ME									
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TITLE			DELETE	3 1 TITI	ιE							Ch	ange	Addition
NAME				3.2 NAJ	ME									
STREET ADDRESS				3.3 STF	EET.	ADDRESS								
CITY-ST-ZIP				34. CI	ry-si	r-ZIP								
TITLE			☐ DELETE	4.1 TITI	LE							CH	ange	☐ Addition
NAME				4. 2 NA	ME									
STREET ADDRESS	,			4.3 STF	REET	ADORESS								
CITY-ST-ZIP				4.4 CIT	Y-ST	-ZIP								
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NAME {				5.2 NAJ	ME								•	
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CITY-ST-ZIP				5.4 CIT	Y-ST	-ZIP								
TITLE		· · ·	DELETE	6.1 TIT	ĪΕ							CH	ange	☐ Addition
NAME				6.2 NA	ME									
STREET ADDRESS				6.3 ST	REET	ADORESS								
CITY-ST-ZIP				6.4 CIT										
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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, with all other like empowered.

SIGNATURE:

PP-06-4

3P01-125T. TGT