

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 8:00 am
Secretary of State

01-22-2007 90089 001 ***150.00

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01172007 Chg-P CR2E034 (12/06)

DOCUMENT # G98217 1. Entity Name AMERICABLE INTERNATIONAL, INC.					
Principal Place of Business 10735 SW 216TH STREET 404 MIAMI, FL 33170 US			Mailing Address PO BOX 859 MIAMI, FL 33197 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 59-2475388 Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent SMITH, JAMES H 10735 SW 216 ST SUITE 404 MIAMI, FL 33170	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		DATE _____	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HERMANOWSKI, JOAN A 5845 COLLINS AVE. #406 MIAMI BEACH, FL 33140	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERMANOWSKI, CHARLES A 8298 BRIDLE PATH BOCA RATON, FL 33496	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SMITH, JAMES H 14625 S.W. 63 CT. CORAL GABLES, FL 33158	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, JOY 14625 SW 63 CT CORAL GABLES, FL 33158	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASE, JEAN A 500 RODES DR. CHARLOTTESVILLE, VA 22903	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERMANOWSKI, KIM E 5845 COLLINS AVE #406 MIAMI, FL 33140	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Hermanowski, Joan A. 5845 Collins Ave. #406 Miami Beach, Fl. 33140	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Case, Jean A. 3466 Morgantown Rd. Charlottesville, Va. 22903	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Hermanowski, Kim E 445 NE 3rd St. Boca Raton, Fl. 33432	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>James H. Smith</u> JAMES H. Smith 1-19-07 305-256-6844 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT
40003850

AMERICABLE INTERNATIONAL, INC.
DOCUMENT NUMBER - G98217
FEI NUMBER 59-2475388

2007 FOR PROFIT CORPORATION ANNUAL REPORT - CONTINUED

DIRECTORS

10. CONTINUED

D
HERMINIO SAN ROMAN
1462 SIENA AVE.
CORAL GABLES, FL. 33146

11. ADDITIONS

D
HARVEY C. EADS
300 SOUTH POINTE DR.
UNIT 2103
MIAMI BEACH, FL. 33139