SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

D TORREAL DITT BOTTA BUTTA BUTTO IBITO 1916 DIDLU BUTTU DIBLI BUTTU BUTTU BUTTU BUTTU BUTTU BUTTU

14 Sunc 96 352-351-9517

DOCUMENT #

1. Corporation Name

SIGNATURE:

H05592

(1)

SUN CABLE & SATELLITE, INC.

Principal Place	of Business	Mailing Address			-	. 6164) 6161) 4			
P.O. BOX 2050		P.O. BOX 2050 OCALA FL 34478							
OCALA FL 34478		COALS PL 54970			3. Date Incorporated or Qualified 05/30/1984	3a. Date of Last Report 08/03/1995			
2. Principal Pla		2a, Mailing Address			4. FEI Number			Applied	For
z. Principal Pla	ce or business	26			59-2420794			ot Apol	licable
Suite, Apt #	. etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	[_]	\$8.75		
2		27			a. Certificant of States (Section	<u> </u>		Required	
City & State		City & State			Election Campaign Financing Trust Fund Contribution			0 May E d to Fee	
Zip	Country	28 Zip		Country	8. This corporation has liability for it			s 199 0	32.
4	25	29	30		Florida Statutes	Yes	No		
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered A	gent		
JAC	KSON, L. REID III			81 Name					
223	0 SE 13TH ST.				2 Street Address (P.O. Box Number is Not Acceptable)				
OC/	ALA FL 34471			83	411/4				
				84 City		FL	85 Z1	p Code	
	- No. 200 in and of Parties 207 050	12 and 607 1508 Florida Sta	tutes the	above-named corp	oration submits this statement for the pu	urnase of a	changing	its regis	tered
	egistered agent, or both, in the State in familiar with, and accept the oblig				on's board of directors. Thereby accept	c ii c, cippo			
SIGNATURE			rionda 3	natures	and a new world have all				
SIGNATURE	Signaturi Type Lor printed curve of regelered ag-	न्तर and title if applicable	NOIL Regis	rered Agent signature requir		TIA ^r t		ORS IN	
SIGNATURE	Signature Type dior printed raise of registered age OFFICERS AN		NOTE Regis	natures	red when reinstalling) ADDITIONS/CHANGES 10 OFFIC	TIA ^r t			12
SIGNATURE 12. TITLE	Signation type for prime focus of ingestime face OFFICERS AN	et and title if applicable ID DIRECTORS	NOTE Regs	rered Agent signature requir		TIA ^r t	DIRECTO		12
SIGNATURE 12. THE NAME	Square type for principlants of regularitative OFFICERS AN PO JACKSON, L. REID III	et and title if applicable ID DIRECTORS	NOTE Regis	sered Agent signature requir 13.		TIA ^r t	DIRECTO		12
SIGNATURE 12. TITLE NAME STREFT ADDRESS	Square type for principles of regelered age OFFICERS AN PD JACKSON, L. REID III 2230 SE 13TH ST.	et and title if applicable ID DIRECTORS	NOIE Regis	cered Agent signature requir 1.3. 1. Title 1.2. NAME		TIA ^r t	DIRECTO	e [_]	12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signation type for printed case of registrated age PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL	et and title if applicable ID DIRECTORS	NOTE Regis	vered Agent signature requir 13. 1 TITLE 12 NAME 1.3 STREET ADDRESS		TIA ^r t	DIRECTO	e [_]	12 Addition
SIGNATURE 12. TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE	OFFICERS AN PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL	et as fide if apple able ID DIRECTORS DELETE	NOTE Regis	vered Agent signature requir 13. 1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY - ST-ZIE		TIA ^r t	DIRECTO	e [_]	12 Addition
SIGNATURE 12. TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME	Signation type for printed case of registrated age PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL	et as fide if apple able ID DIRECTORS DELETE	1 1 1 1 2 2 2	weed Agent signature requir 13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY - ST-ZIF 2 LITILE		TIA ^r t	DIRECTO	e [_]	12 Addition
SIGNATURE 12. TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR.	CT as 100e if applicative ID DIRECTORS DELETE DELETE	1 1 1 1 1 2 2 2 2 2	weed Agent signature requir 3. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIF 21 TITLE 22 NAME		TIA ^r t	DIRECTO Chang	e []	12 Addition Addition
SIGNATURE 12. THLE NAME STREFT ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS CITY-ST-ZIP	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST.	et as fide if apple able ID DIRECTORS DELETE	1 1 1 1 2 2 2 2 2 2 2 2	creed Agent signature requir 3. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY - ST-ZIF 21 TITLE 22 NAME 2.3 STREET ADDRESS		TIA ^r t	DIRECTO	e []	12 Addition Addition
SIGNATURE 12. THLE NAME STREFT ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS CITY-ST-ZIP	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST.	CT as 100e if applicative ID DIRECTORS DELETE DELETE	1 1 1 1 2 2 2 2 2 2 3 3 3	creed Agent signature requir 3. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIF 2.1 TITLE 2.2 NAME 2.2 STREET ADDRESS 2.4 CITY-SI-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-SI-ZIP 3.1 TITLE 3.2 NAME		TIA ^r t	DIRECTO Chang	e []	12 Addition Addition
SIGNATURE 12. TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST.	CT as 100e if applicative ID DIRECTORS DELETE DELETE	1 1 1 1 1 2 2 2 2 2 2 2 3 3 3 3 3 3 3 5 7 10 10 10 10 10 10 10 10 10 10 10 10 10	Actives signature required agents signature required agents signature required agents		TIA ^r t	DIRECTO Chang	e []	12 Addition Addition
SIGNATURE 12. TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST.	CT an 1006 if applicative ID DIRECTORS DELETE DELETE DELETE	1 1 1 1 2 2 2 2 2 2 2 2 2 3 3 3 3 3 3 3	Activities Activi		TIA ^r t	DIRECTO Chang Chang	e	12 Addition Addition
SIGNATURE 12. 131LE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST.	CT as 100e if applicative ID DIRECTORS DELETE DELETE	1 1 1 1 1 2 2 2 2 2 2 2 3 3 3 3 3 4 4 4 4 4 4 4 4	Actives signature required as a signature as a sign		TIA ^r t	DIRECTO Chang	e	12 Addition Addition
SIGNATURE 12. 11LE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST.	CT an 1006 if applicative ID DIRECTORS DELETE DELETE DELETE	1 1 1 1 1 2 2 2 2 2 2 2 3 3 3 3 3 4 4 4 4 4 4 4 4	Actives signature required as a signature as a sign		TIA ^r t	DIRECTO Chang Chang	e	12 Addition Addition
SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-ZIP THLE	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST.	CT an 1006 if applicative ID DIRECTORS DELETE DELETE DELETE	1 1 1 1 1 2 2 2 2 2 2 2 2 3 3 3 3 3 4 4 4 4 4 4 4	Actives synature required as a synathetic and a synathetic as a sy		TIA ^r t	DIRECTO Chang Chang	e	12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST.	CT AS FICIENT APPRIMATE ID DIRECTORS DELETE DELETE DELETE	1 1 1 1 1 1 2 2 2 2 2 2 2 2 3 3 3 3 3 3	Actives synature required as a synathetic as a syn		TIA ^r t	DIRECTO Chang Chang Chang	e	12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME THE STREET ADDRESS CITY-ST-ZIP TITLE	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST.	CT an 1006 if applicative ID DIRECTORS DELETE DELETE DELETE	1 1 1 1 1 1 2 2 2 2 2 2 2 2 3 3 3 3 3 3	ACTIVE STREET ADDRESS 2 STREET ADDRESS 3 STREET ADDRESS 3 STREET ADDRESS 3 STREET ADDRESS 4 CITY ST-ZIP 3 TITLE 4 STREET ADDRESS 4 CITY ST-ZIP 4 TITLE 4 STREET ADDRESS 4 CITY ST-ZIP 5 TITLE 5 STREET ADDRESS 4 CITY ST-ZIP 5 STREET ADDRESS 5 STREET ADDRESS 4 CITY ST-ZIP 5 STREET ADDRESS 4 CITY ST-ZIP 5 STREET ADDRESS 4 CITY ST-ZIP 5 STREET ADDRESS 5 STREET ADDRESS 5 STREET ADDRESS 4 CITY ST-ZIP 5 STREET ADDRESS		TIA ^r t	DIRECTO Chang Chang Chang	e	12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST.	CT AS FICIENT APPRIMATE ID DIRECTORS DELETE DELETE DELETE	1 1 1 1 1 1 2 2 2 2 2 2 2 2 3 3 3 3 3 3	ACTIVE STATE OF THE CONTROL OF THE C		TIA ^r t	DIRECTO Chang Chang Chang	e	Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST.	CT AS FICIENT APPRIMATE ID DIRECTORS DELETE DELETE DELETE	1 1 1 1 1 1 2 2 2 2 2 2 2 3 3 3 3 3 3 3	A CITY - ST - ZIP 2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2 NAME 2 NAME 2 NAME 2 STREET ADDRESS 2 4 CITY - ST - ZIP 3 TITLE 3 SINEET ADDRESS 3 LOTT - ST - ZIP 4 TITLE 4 2 NAME 4 STAREET ADDRESS 4 CITY - ST - ZIP 4 TITLE 5 1 NAME 5 3 STREET ADDRESS 4 CITY - ST - ZIP 5 TITLE 5 2 NAME		TIA ^r t	DIRECTO Chang Chang Chang	e	12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST.	CT AS FICIENT APPOINTANCE ID DIRECTORS DELETE DELETE DELETE DELETE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A CITY - ST - ZIP 1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIF 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY - ST - ZIP 3 1 TITLE 3 2 NAME 3 3 SINEET ADDRESS 3 4 CITY - ST - ZIP 4 1 TITLE 4 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP		TIA ^r t	DIRECTO Chang Chang Chang	e	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST.	CT AS FICIENT APPRIMATE ID DIRECTORS DELETE DELETE DELETE	1 1 1 1 1 1 1 2 2 2 2 2 2 2 3 3 3 3 3 3	ACTIVE STATE OF THE CONTROL OF STATE OF		TIA ^r t	DIRECTO Chang Chang Chang Chang	e	Addition Addition Addition
SIGNATURE 12. 1:ILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST.	CT AS FICIENT APPOINTANCE ID DIRECTORS DELETE DELETE DELETE DELETE	1 1 1 1 1 1 2 2 2 2 2 3 3 3 3 3 3 3 3 3	A CITY - ST - ZIP 1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY - ST - ZIP 3 1 TITLE 3 2 NAME 4 2 NAME 4 2 NAME 4 2 NAME 5 2 NAME 5 2 NAME 5 3 STREET ADDRESS 4 CITY - ST - ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP 6 1 TITLE 6 2 NAME		TIA ^r t	DIRECTO Chang Chang Chang Chang	e	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN PD JACKSON, L. REID III 2230 SE 13TH ST. OCALA FL TSD FANTE, NORBERT J SR. 3337 SE 15TH ST. OCALA FL	DELETE DELETE DELETE DELETE DELETE	1 1 1 1 2 2 2 2 2 2 2 2 2 3 3 3 3 3 3 3	CHICKES CHICAL AGENT SIGNATURE REQUIR 13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP 2.1 TITLE 2.2 NAME 2.2 STREET ADDRESS 2.4 CITY-SI-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-SI-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-SI-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-SI-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-SI-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-SI-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-SI-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-SI-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-SI-ZIP		CERS AND	DIRECTO Chang Chang Chang Chang	e	12 Addition Addition Addition

SIGNATURE AND THE DOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR