

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # J59676 (3)

1. Corporation Name  
FIRST CABLE CORP.



Principal Place of Business

CONGRESS CORPORATE PLAZA  
902 CLINT MOORE ROAD, SUITE 100, BLDG 4  
BOCA RATON FL 33487  
US

Mailing Address

CONGRESS CORPORATE PLAZA  
902 CLINT MOORE ROAD, SUITE 100, BLDG 4  
BOCA RATON FL 33487  
US

3. Date Incorporated or Qualified 03/03/1987

3a. Date of Last Report 01/18/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CONWAY, STEPHEN P.  
902 CLINT MOORE ROAD  
SUITE 100  
BOCA RATON FL 33487

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 of Tax Corporation or Other Person Designated as Registered Agent

Signature of New Registered Agent (Signature Required if Agent is Changing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE PD  
NAME CONWAY, STEPHEN P.  
STREET ADDRESS 902 CLINT MOORE ROAD, SUITE 100, BLDG.4  
CITY-STATE-ZIP BOCA RATON FL

2. TITLE  
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02/14/96 01017-003  
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 this 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephen P. Conway

DATE

Typed Name of Person

CR2E034 (12/95)