

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000012518

FILED
Apr 17, 2007
Secretary of State

Entity Name: ACCELERATED BROADBAND, L.L.C.

Current Principal Place of Business:

5801 NORTH ANDREWS WAY
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

5801 NORTH ANDREWS WAY
FT. LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 90-0066483

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALVER, PAUL
2721 EXECUTIVE PARK DRIVE
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ACCELERATED FUNDING, L.C.
Address: 301 CLEMATIS STREET, SUITE 3000
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGR () Delete
Name: NA COMMUNICATIONS, L, LC
Address: 6431 COW PEN ROAD
City-St-Zip: MIAMI LAKES, FL 33014

Title: MGR () Delete
Name: TROIKA TRIPLE PLAY, LLC
Address: 3459 N.E. 163RD STREET
City-St-Zip: N. MIAMI BEACH, FL 33160

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ACCELERATED FUNDING, LC

MGR

04/17/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date