


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 29, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000085616

1. Entity Name
AMERICAN CABLE, LLC



Principal Place of Business Mailing Address

4065 NORTH HAVERHILL ROAD, SUITE B3-300 **4065 NORTH HAVERHILL ROAD, SUITE B3-300**
WEST PALM BEACH, FL 33417 **WEST PALM BEACH, FL 33417**

DO NOT WRITE IN THIS SPACE



03232006 No Chg-LLC CR2E083 (11/05)

4. FEI Number Applied For
05-0662513 Not Applicable

6. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

MINERLEY, KENNETH L
980 NORTH FEDERAL HIGHWAY, SUITE 412
BOCA RATON, FL 33432

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retiring)

Filing Fee is \$50.00
Due by May 1, 2008

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	KLEPEC, DONA
STREET ADDRESS	3188 SANTA MARGARITA ROAD
CITY-ST-ZIP	WEST PALM BEACH, FL 33411
TITLE	MGRM
NAME	BAYTAKTAR, GOKBERK
STREET ADDRESS	VISNE-2 MAH, 4CADDE, 6-A SOKAK, #4
CITY-ST-ZIP	ZEKERIYAKOY-SARIYER TURKEY,
TITLE	MGRM
NAME	BAYRAKTAR, OSMAN
STREET ADDRESS	VISNE-2 MAH, 4CADDE, 6-A SOKAK, #4
CITY-ST-ZIP	ZEKERIYAKOY-SARIYER TURKEY,
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. 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 is true and accurate and that my 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: *[Signature]* Date: 03/23/06 Daytime Phone #: (561) 712-9791

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE