FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 24 1998 8:00am Secretary of State

DOCUI	VIENI	# L722	?16 (9)						
CABLE READY INSTALLATION, INC.							į.			
CABLE	HEAUT I	NSTALLATION	, INC.							
Principal Place	e of Busines	·s	Mailing Addre	Mailing Address						
3029A REYNO	KOS RO		3029A REYNO	3029A REYNOLDS RD						
LAKELAND FL 33803			LAKELAND FI	LAKELAND FL 33803			DO NOT WIDITE IN THIS COACE			
บร			U\$	US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
							05/09/1990	ļ		
2. Principal Pl	lace of Busin	ness	2a. Mailing Ad	2a. Mailing Address			4. FEI Number Applie	d For		
21			26	26				pplicable		
Suite, Apt.	#, etc.		Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Addi	itional		
22			27				Fee Require	red		
City & State	e			City & State			6. Election Campaign Financing \$5.00 Ma			
Zip		Country		Zip Country						
24		25	29				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
24 25 29 18 18 18 18 18 18 18					~		10. Name and Address of New Registered Agent			
UE	RIG. ELIZA				81	Name				
302				Street A	Address (P.O. Box Number is Not Acceptable)					
	(ELAND FL						Address (r.O. Box Number is Not Acceptable)			
					63]		
					84	City	FL 85 Zip Code			
11. Pursuant t	to the provis	ions of Sections 60	7.0502 and 607 1508. Flo	rida Statutes	the above	-named (, , , , , , , , , , , , , , , , , , ,	gistered		
office or re	egistered ag	ent, or both, in the	State of Florida, Such chipplinations of Section 60	ange was au	rthorized by	the corp	corporation submits this statement for the purpose of changing its re- oration's board of directors. I hereby accept the appointment as regi	istered		
SIGNATURE	arrimar pr	in, and dooope me	obligationa of, buotieri oc	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ou outure	•				
0.0.0.	Signature, typed		red agent and title if applicable	(NOTE	Registered Age	nt signature r	required when reinstating) DATE			
12.		OFFICER	S AND DIRECTORS	DELETE	13.	т	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	N 12 Addition		
TITLE NAME	D DELETE DELETE			DELETE	1.1 TITLE 1.2 NAME		Change	T MOORION		
STREET ADDRESS 139 OAK SQUARE N.						ADDRESS				
'	CITY-ST-ZIP LAKELAND FL			1		T-ZIP		i		
TITLE	D	10 10		DELETE 21 TI		-	Change C	Addition		
NAME	HERIG.	ROBERT C.		2.2 NA			•			
STREET ADDRESS				2.3 (ADDRESS		Į		
CITY-ST-ZIP LAKELAND FL			·			T-ZIP				
TITLE			L	DELETE 3.1 TITLE			☐ Change	Addition		
NAME					3.2 NAME	- 1		{		
STREET ADORESS	;]				3.3 STREET			ŀ		
CITY-ST-ZIP TITLE	☐ DELETE				3.4. CITY - S	I - ZIP	Change	Addition		
NAME	_ Julie			4.2 NAME		_ Change _				
STREET ADDRESS					4.3 STREET	ADDRESS		1		
CITY-ST-ZIP				4.4 CITY - ST - ZIP			1			
TITLE	DELETE			5.1 TITLE		☐ Change	Addition			
NAME					5.2 NAME					
STREET ADDRESS					5.3 STREET	ADDRESS		ľ		
CITY-ST-ZIP					5.4 CffY-\$	T-ZIP				
TITLE				DELETE	6.1 TITLE		☐ Change ☐	Addition		
NAME					6.2 NAME	ľ		Ì		
STREET ADDRESS					6.3 STREET]		
CITY-SI-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the						r-ZIP	d in Continu 110 07/2V/) Florida Centutan I further continut at the infe	ringliss		
14. inereby c	อาแห เกลเ โก	в ипопланов зиррі	iieo with this filing does n	or doming tot	me exempl	HOH SIBIE	u in accusi i rator(a)(i), rionua atatutes, i turiner certity that the into	# maxion		

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 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 12 or Block 13 if changed, or on an attachment with an address.

941-665-7788