

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2001 8:00 am
Secretary of State
 04-24-2001 90317 046 ***150.00

DOCUMENT # P00000016015

1. Entity Name

PRECISE CABLE CONSTRUCTION, INC.

Principal Place of Business

**4920 N.W. 177TH STREET
 MIAMI FL 33055**

Mailing Address

**4920 N.W. 177TH STREET
 MIAMI FL 33055**

2. Principal Place of Business

1811 N.W. 28 AVE.

3. Mailing Address

1811 N.W. 28 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Fort Lauderdale, FL

City & State

Fort Lauderdale, FL

Zip

33311-4415

Country

U.S.A

Zip

33311-4415

Country

U.S.A.

4. FEI Number

65-0991473

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**QUINN, VERNON
 4920 N.W. 177TH STREET
 MIAMI FL 33055**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Vernon Quinn

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-11-01

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	QUINN, VERNON	
STREET ADDRESS	4920 N.W. 177TH STREET	
CITY-ST-ZIP	MIAMI FL 33055	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	JOHNSON, JR., JAMES	
STREET ADDRESS	4920 N.W. 177TH STREET	
CITY-ST-ZIP	MIAMI FL 33055	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GRAHAM, DUANE	
STREET ADDRESS	4920 N.W. 177TH STREET	
CITY-ST-ZIP	MIAMI FL 33055	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GRIFFIN, DAVID	
STREET ADDRESS	4920 N.W. 177TH STREET	
CITY-ST-ZIP	MIAMI FL 33055	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TARIKA QUINN	
STREET ADDRESS	1811 N.W. 28 AVE	
CITY-ST-ZIP	FT-Lauderdale, FL 33311	
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VERNON QUINN	
STREET ADDRESS	1811 NW 28 AVE	
CITY-ST-ZIP	FT-Lauderdale, FL 33311	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Vernon Quinn

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-01 (305) 525-4170

Date

Daytime Phone #

CR2E034 (10/00)