

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 OCT -6 PM 2:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P000000 86663

1. Entity Name

CATV SOLUTIONS, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2314 West 80 Street

Suite, Apt. #, etc.

Unit 6

City & State

HALEAH FL

3. Mailing Address

2314 West 80 Street

Suite, Apt. #, etc.

Unit 6

City & State

HALEAH FL

Zip

33016

Country

USA

Zip

33016

Country

USA

4. FEI Number

65-1046570

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

CAPOTE, ELIEZER

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

2314 West 80 Street Unit 6

City

HALEAH

FL

Zip Code

33016

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

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

(NOTE: Registered Agent signature required when re-stating)

DATE

9/01/03

January 1 - May 1, Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PS
NAME CAPOTE, ELIEZER
STREET ADDRESS 12502 SW 53rd Street
CITY-ST-ZIP MIRAMAR FL 33027

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
200023553842
10/03/03--01087--005 **150.00

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**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other filers, as required.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/01/03 (305) 231-1478

CR2E034B (12/02)

September 01, 2003

**Division of Corporation
Uniform Business Report Filings**

**From: CATV SOLUTIONS, INC.
P00000086663**


**Through this I want to notify that the papers for Uniform Business report
never been send to me.**

**I went to an Accounting Office and they let me Know the amount to be pay for the
company and also the reports.**

**I apology for the inconvenient then here I am sending my payments for the year of
2003.**

Any question contact me (305) 231-1438

Sincerely,



**ELIEZER CAPOTE
President**