

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 17, 2002 8:00 am
Secretary of State

07-17-2002 90137 048 ***150.00

DOCUMENT # P01000120995

1. Entity Name
TAMPA CABLE INC.

Principal Place of Business
2802 NORTHPOINTE LANE
TAMPA FL 33611

Mailing Address
2802 NORTHPOINTE LANE
TAMPA FL 33611

2. Principal Place of Business

2802 Northpointe Ln
 Suite, Apt. #, etc.

3. Mailing Address

2802 Northpointe Ln
 Suite, Apt. #, etc.

City & State

Tampa FL

City & State

Tampa FL

Zip

FL

Country

US

Zip

33611

Country

US

4. FEI Number

80-0002487

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

QUINTANA, KC
2802 NORTHPOINTE LANE
TAMPA FL 33611

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* **VP**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **P** ☐ Delete
 NAME **QUINTANA, CLAUDIA I**
 STREET ADDRESS **2802 NORTHPOINTE LANE**
 CITY-ST-ZIP **TAMPA FL 33611**

TITLE **V** ☐ Delete
 NAME **QUINTANA, KC**
 STREET ADDRESS **2802 NORTHPOINTE LANE**
 CITY-ST-ZIP **TAMPA FL 33611**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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TITLE ☐ Change ☐ 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: *[Signature]* **VP**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

813-832-4228

CR2E034 (4/02)

Attachment
01/P01000120995
TAMPA CABLE INC.

Attachment

2802 Northpointe Lane
Tampa, FL 33611

Phone 813-832-4228
Fax 813-835-6864

July 03, 2002

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

DOCUMENT # P 01000120995

To Whom It May Concern,

I recently received a form for filing the 2002 Uniform Business Report. It stated that the filing fee for this report is \$550.00. This is the first time I receive any request to file this report. I'm writing this letter to request that you wave the assessed late fee. Please accept \$150 check I'm submitting as the filing fee for this year's report. If you need any information please call me at 813-789-8226. Thank you for your help.

Sincerely,

Claudia Quintana
President