

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000008470

1. Entity Name
DAVIE SATELLITE & CABLE SYSTEMS, INC.



FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90416 019 ***158.75

Principal Place of Business

1956 SW 82ND AVENUE
DAVIE, FL 33324

Mailing Address

1956 SW 82ND AVENUE
DAVIE, FL 33324

2. Principal Place of Business

943 W. River Dr.

3. Mailing Address

943 W. River Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03022004

Chg-P

CR2E034 (10/03)

City & State

Margate FL

City & State

Margate FL

4. FEI Number

05-0552984

Applied For

Not Applicable

Zip

33063

Country

USA

Zip

33063

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

HUBBARD, DERRICK L
1956 SW 82ND AVENUE
DAVIE, FL 33324

7. Name and Address of New Registered Agent

Name

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

943 W. River Drive

City

Margate

FL

Zip Code

33063

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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE 4-21-04

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME HUBBARD, DERRICK L.
STREET ADDRESS 1956 SW 82ND AVENUE
CITY-ST-ZIP DAVIE, FL 33324

TITLE TREA ☐ Delete
NAME HUBBARD, DERRICK L.
STREET ADDRESS 1956 SW 82ND AVENUE
CITY-ST-ZIP DAVIE, FL 33324

TITLE VP ☐ Delete
NAME HUBBARD, ERIN L.
STREET ADDRESS 1956 SW 82ND AVENUE
CITY-ST-ZIP DAVIE, FL 33324

TITLE SECR ☐ Delete
NAME HUBBARD, ERIN L.
STREET ADDRESS 1956 SW 82ND AVENUE
CITY-ST-ZIP DAVIE, FL 33324

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 943 W. River Dr
CITY-ST-ZIP Margate FL 33063

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

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

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NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Derrick L. Hubbard 4-21-04 954-917-7949