

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008470

FILED
Apr 14, 2006
Secretary of State

Entity Name: DAVIE SATELLITE & CABLE SYSTEMS, INC.

Current Principal Place of Business:

943 W. RIVER DR
POMPAN0 BEACH, FL 33063

New Principal Place of Business:

943 W. RIVER DR
MARGATE, FL 33063

Current Mailing Address:

943 W. RIVER DR
POMPAN0 BEACH, FL 33063

New Mailing Address:

943 W. RIVER DR
MARGATE, FL 33063

FEI Number: 05-0552984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUBBARD, DERRICK L
943 W. RIVER DRIVE
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HUBBARD, DERRICK L
Address: 943 W. RIVER DR.
City-St-Zip: MARGATE, FL 33063

Title: TREA () Delete
Name: HUBBARD, DERRICK L
Address: 1956 SW 82ND AVENUE
City-St-Zip: DAVIE, FL 33324

Title: VP () Delete
Name: HUBBARD, ERIN L
Address: 943 W RIVER DR
City-St-Zip: MARGATE, FL 33063

Title: SECR () Delete
Name: HUBBARD, ERIN L
Address: 943 W RIVER DR
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TREA (X) Change () Addition
Name: HUBBARD, DERRICK L
Address: 943 W. RIVER DR
City-St-Zip: MARGATE, FL 33063

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DERRICK L. HUBBARD

P

04/14/2006

Electronic Signature of Signing Officer or Director

Date