2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000037829

Entity Name: L.V. CABLE SERVICES, INC.

US

FILED Jan 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

19800 SW 180 AVE 12490 SW 218 ST UNIT 379 12490 SW 218 ST MIAMI, FL 33170

MIAMI, FL 33187 US

Current Mailing Address: New Mailing Address:

PO BOX 351421 MIAMI, FL 33135

FEI Number: 01-0776459 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VALDES, LAZARO M
19800 SW 180 AVE
UNIT 379
MIAMI, FL 33187 US

VALDES, LAZARO M
12490 SW 218 ST
MIAMI, FL 33170 US

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: LAZARO M. VADLES 01/18/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: () Delete Title: (X) Change () Addition VALDES, LAZARO M Name: Name: VALDES, LAZARO M 19800 SW 180 AVE UNIT 379 PO BOX 351421 Address: Address: City-St-Zip: MIAMI, FL 33187 US City-St-Zip: MIAMI, FL 33135 US

 $\label{eq:title:V} \mbox{Title:} \qquad \mbox{V} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{V} \qquad \mbox{(X) Change () Addition}$

 Name:
 ANTON, ADA M
 Name:
 ANTON, ADA M

 Address:
 19800 SW 180 AVE UNIT 379
 Address:
 PO BOX 351421

 City-St-Zip:
 MIAMI, FL 33187 US
 City-St-Zip:
 MIAMI, FL 33135 US

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: LAZARO M. VALDES P 01/18/2006