

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT


**FILED**  
**Apr 07, 2008 8:00 am**  
**Secretary of State**

04-07-2008 90037 034 \*\*\*150.00

DOCUMENT # P05000013546	
1. Entity Name CABLE INVESTMENTS UNLIMITED, INC.	

Principal Place of Business 3330 SW 3RD AVE FT LAUDERDALE, FL 33315	Mailing Address 3330 SW 3RD AVE FT LAUDERDALE, FL 33315
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

	
03252008	Chg-P CR2E034 (12/06)
4. FEI Number 54-2167286	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MILLIKEN, KELLIE 3330 SW 3RD AVE FT LAUDERDALE, FL 33315	
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CABLE, GEORGE 3330 SW 3RD AVE FT LAUDERDALE, FL 33315 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD CABLE, ELIZABETH 3330 SW 3RD AVE FT LAUDERDALE, FL 33315 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD MILLIKEN, KELLIE 3330 SW 3RD AVE FT LAUDERDALE, FL 33315 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC STRAUSS, ELMER 3330 SW 3RD AVE FT LAUDERDALE, FL 33315 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ENNIS, MICHAEL 3330 SW 3 AVE FORT LAUDERDALE, FL 33315 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STRUM, GARY 3330 SW 3 AVE FORT LAUDERDALE, FL 33315 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition STURM, GARY

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Kellie Milliken SEE ATTACHMENT Kellie Milliken 4/3/08 954-527-9005  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40060491

**Attachment to 2007 For Profit Corporation Annual Report**

**Document #P05000013546**

Cable Investments Unlimited, Inc.  
3330 SW 3<sup>rd</sup> Avenue  
Fort Lauderdale, FL 33315

**Block 10 Additional Officers and Directors:**

Addition:

V

Brian K. Willis  
3330 SW 3<sup>rd</sup> Avenue  
Fort Lauderdale, FL 33315