

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000113848

Entity Name: D.G TAL CABLE, INC.

FILED
Apr 11, 2009
Secretary of State

Current Principal Place of Business:

931 N STATE RD 434
1201
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

931 N STATE RD 434
1201-210
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

13838 OSPREY NEST LANE
278
ORLANDO, FL 32837

New Mailing Address:

13838 OSPREY NEST LANE
278
ORLANDO, FL 32837

FEI Number: 20-5490513

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALUE, DANIEL A
931 N STATE RD 434
1201-210
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

GALUE, DANIEL A
13838 OSPREY NEST LANE
278
ORLANDO, FL 32837 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:

04/11/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GALUE, DANIEL A
Address: 931 N STATE RD 434
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GALUE, DANIEL A
Address: 13838 OSPREY NEST LANE APT-278
City-St-Zip: ORLANDO, FL 32837

I hereby certify that the information supplied with this filing does not qualify 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: DANIEL GALUE

P

04/11/2009

Electronic Signature of Signing Officer or Director

Date