

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000140610

Entity Name: FAST-CABLINGX CORP

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

8012 NW 11TH AVENUE
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

8012 NW 11TH AVENUE
MIAMI, FL 33150

New Mailing Address:

FEI Number: 39-2059612

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHARLES, EMMANUEL
8012 NW 11TH AVE
MIAMI, FL 33150 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: DESIR, MARC
Address: 8288 NW 17TH AVE
City-St-Zip: MIAMI, FL 33147

Title: VP () Delete
Name: CHARLES, EMMANUEL
Address: 8288 NW 17TH AVE
City-St-Zip: MIAMI, FL 33147

Title: VP () Delete
Name: WESLEY, SHERLEY
Address: P.O. BOX 531007
City-St-Zip: MIAMI SHORES, FL 33153

Title: D () Delete
Name: BLOT-JEAN-CHARLES, ROSE P
Address: 915 NE 138 STREET
City-St-Zip: NORTH MIAMI, FL 33161

Title: D (X) Delete
Name: EWISTON, POLYNICE
Address: 8288 NW 17 AVENUE
City-St-Zip: MIAMI, FL 33147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BLANCHARD, WESLEY JEAN
Address: 13285 NE 6TH AVE APT #S210
City-St-Zip: MIAMI, FL 33161

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

Title: VP (X) Change () Addition
Name: WESLEY, SHERLEY
Address: P.O BOX 531007
City-St-Zip: MIAMI, FL 33153

Title: D (X) Change () Addition
Name: BLOT JEAN-CHARLES, ROSE P
Address: 915 NE 138 ST
City-St-Zip: NORTH MIAMI, FL 33161

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

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: ROSE BLOT JEAN-CHARLES

D

04/30/2008

Electronic Signature of Signing Officer or Director

Date