

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Murphree
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY - 1 AM 1:23

DOCUMENT # **P93000023305 (4)**

1. Corporation Name

ACCURATE BUSINESS CABLING, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

6520 SW 138TH CT #601
MIAMI FL 33183

Mailing Address

6520 SW 138TH CT #601
MIAMI FL 33183

DO NOT WRITE IN THIS SPACE

3. Date Incorporation or Qualification
03/29/1993

3a. Date of Last Report
04/18/1994

4. FEI Number
65-0399062

Applied For
Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contributor

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under 5-199-032,
Florida Statutes Yes No

2. Principal Place of Business

21

State Apt # etc.

23. City & State

24. Zip

25. County

2a. Mailing Address

26

State Apt # etc.

27. City & State

28

Zip

29. County

30

9. Name and Address of Current Registered Agent

**PICHS, ANDRES F
6520 SW 138TH CT #601
MIAMI FL 33183**

10. Name and Address of New Registered Agent

81 Name

82 Street Address, P.O. Box Number is Not Acceptable

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.02(2) and 607.03(1) Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, which change was authorized by the corporation's board of directors, thereby, accept the appointment as registered agent. I am familiar with and accept the obligations of agent of said State, Florida Statutes.

SIGNATURE

Signature of the person who is the registered agent of the corporation

Signature of the registered agent of the corporation (only)

Date

12. OFFICERS AND DIRECTORS

13. AGENTS OF CHANGE, COLLECTIONS, AND OTHER OFFICERS

TYPE	NAME	STREET ADDRESS	CITY & STATE	ZIP
D	PICHS, ANDRES F	6520 SW 138TH CT #601	MIAMI	FL 33183
D	PICHS, GRACES F	6520 SW 138TH CT #601	MIAMI	FL 33183

TYPE	NAME	STREET ADDRESS	CITY & STATE	ZIP	Change	Add on
					<input type="checkbox"/>	<input type="checkbox"/>
	Grace M. Pichs				<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

14. I hereby certify that the information reported with this filing is accurately prepared and does not qualify for the exemption stated in Section 117.03(1)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my corporation shall have this report filed with the Secretary of State. I am an officer or director of the corporation or the member or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this report as an officer or director.

SIGNATURE: *Grace M. Pichs - Grace M. Pichs*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95

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