

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 AUG -4 AM 10:06

DOCUMENT # P93000030027 (5)

1. Corporation Name

CABLETECH, INC.

Principal Place of Business

3501 UNIVERSITY DRIVE
STE. 210
CORAL SPRINGS FL 33065

Mailing Address

3501 UNIVERSITY DRIVE
STE. 210
CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/23/1993

3a. Date of Last Report

04/14/1994

4. FEI Number

65-0406404

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for interjurisdictional tax under s. 193.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 3111 UNIVERSITY DRIVE

Suite, Apt. #, etc.

22 SUITE 119

City & State

23 CORAL SPRINGS, FL

Zip

24 33065

Country

25 BROWARD

2a. Mailing Address

26 3111 UNIVERSITY DRIVE

Suite, Apt. #, etc.

27 SUITE 119

City & State

28 CORAL SPRINGS, FL

Zip

29 33065

Country

30 BROWARD

9. Name and Address of Current Registered Agent

ALTMAN, BARRY S
3501 UNIVERSITY DRIVE
STE. 210
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name

ALTMAN, BARRY S.

82 Street Address (P.O. Box Number is Not Acceptable)

3111 UNIVERSITY DRIVE

83

SUITE 210

84 City

CORAL SPRINGS

FL

85 Zip Code

33065

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes.

SIGNATURE

Barry S. Altman

(NOTE: Registered Agent signature required when reappointing)

DATE

June 9, 1995

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P
ALTMAN, BARRY S
4749 NW 98 LANE
CORAL SPRINGS FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 (if changed), or on an attachment with my address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Barry S. Altman, President, June 9, 1995 305-344-6000