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

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

P94000084038 (6)

NORTH AMERICAN TELCO CABLE REPRESENTATIVES, INC.  Principal Place of Business  Mailing Address  1612 BRIDGEWATER DR. HEATHROW FL 32740 US  HEATHROW FL 32746 US								
2 Principal	Place of Business				3. Date Incorporated or Qualified 11/14/1994		te of Last	
21 Principal i	riace of Business	2a. Mailing Address		4. FEI Number	El Number Applied		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-3280666	Not Applicable			
22		27		5. Certificate of Status Desired			5 Additional	
City & Sta	ite	City & State			6. Election Campaign Financing			Required
Zip	Country	<b>28</b>			Trust Fund Contribution		Adde	00 May Be ed to Fees
24	25	29	Countr	У	This corporation has liability for Florida Statutes	intangible ta	ax under s	s 199.032,
<u> </u>	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New I		Agant	
COON	ED STEDUEN II		81	Name		rogister 60	₩ħeist	
COOVER, STEPHEN H 230 N. PARK AVE.			82	Street A	ddress (P.O. Box Number is Not Acceptal	ole)		
	SANFORD FL 32771			L				
			83					
			84	T>	poration submits this statement for the purposed of directors. I hereby accept the appropriate		85 Z	ip Code
SIGNATURE 12.	Signature, typed or printed name of registered agent OFFICERS ANI	and title if applicable. NO	TE: Registered Ager		poration submits this statement for the pur oard of directors. I hereby accept the app uired when reinstang!	DATE		
TITLE	P	DELETE	13.		ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	DRS IN 12
NAME	WEINDRUCH, RONALD L		1.2 NAME				] Change	Addition
STREET ADDRESS	3020 ALATAKA CT.		1.3 STREET	ADDRESS				
TITLE	LONGWOOD FL VP		1.4 CITY-S	T-ZIP				
NAME	RHATTIGAN, JEROME	DELETE	2. 1 TITLE				Change	☐ Addition
STREET ADDRESS	1612 BRIDGEWATER DR.		2.2 NAME					<del></del>
CITY - ST - ZIP	HEATHROW FL		2.3 STREET :	1				
TITLE	D M/EMIDDHOLL 10V	DELETE	3 1 TITLE			·—-	Change	[ Addition
NAME STREET ADDRESS	WEINDRUCH, JOY 3020 ALATAKA CT.		3.2 NAME			ld	วแลเลิด	Addition
CITY-ST-ZIP	LONGWOOD FL		3.3 STREET					j
TITLE	T	DELETE	3.4 CITY - ST 4. 1 TITLE	- ZiP				
NAME	RHATTIGAN, JANET	~	4. 1 MLE				Cnar ge	☐ Addition
STREET ADDRESS	1612 BRIDGEWATER DR		4.3 STREET A	DDRESS				
DITY-ST-ZIP	HEATHROW FL	F	4.4 CITY-ST	ZIP				
IAME		☐ DELETE	5. 1 TITLE				Change	Addition
STREET ADDRESS			5.2 NAME	DOBECC				
ITY-ST-ZIP			5.3 STREET A	l l				1
ITLE AME		☐ DELETE	6. 1 TITLE				Change	Addition
TREET ADDRESS			62 NAME			ш	≎.เต.เลีย 	☐ Vacation
TY-ST-ZIP			6.3 STREET AC					
	certify that the information supplied wit	h this filing is voluntarily furnish	64 CITY-ST-	ZIP	for the			1

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 appears in Block 12 or Block 12 or Block 12 or annual report or an address. MATURE AND TWEED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: