## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000017730 (8)

THE CABLE ALTERNATIVE 2001, INC.

Principal Place of Business

Mailing Address

## FILED May 01 1998 8:00am Secretary of State



5880 99 AVE NORTH PINELLAS PARK FL 34666		5880 99 AVE NORTH PINELLAS PARK FL 34666				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified			
2. Principal P	lace of Business	2a. Mailing Address	<del> </del>			02/26/1996 4. FEI Number	I Ar	oplied For	
7320	47th Street	7320 47th Street				59-3358587		ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					\$8.75 Additional Fee Required		
	llas Park, Fl	City & State  28 Pinellas Park, Fl				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 337		Zip 33781 Cour 30			·····	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
g, Name and Address of Current Registered Agent						10. Name and Address of New Registered Ag	ent		
GAGNE, CAROLE				81	Name				
5880 99 AVE NORTH PINELLAS PARK FL 34886			L	82 83		ress (P.O. Box Number is Not Acceptable) 7th Street			
							· · · · · · · · · · · · · · · · · · ·		
				84	City <b>Pin</b>	ellas Park FL	85 Zip (	Code 781	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the ab	oove-	named corp	CITOU I GEN			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.									
SIGNATURE	Signature, typed or printed name of registered agen	signe , PR	e.S.			ired when reinstating) DAYE	4/23	198	
12.	OFFICERS AND	<u> </u>	13.	Agon	r signature rector	ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTOR	IS IN 12	
TITLE	P	DELETE	1.5 TIT	LF			Change	Addition	
NAME	GAGNE, CAROLE		1.2 NA	ME		••	•		
STREET ADDRESS	5880 99TH AVE NORTH		13 ST	REET A	ODRESS 732	20 47th Street vellas Park FL 33781		ļį.	
CITY-ST-ZIP	PINELLAS PARK FL				-ZIP //				
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TITLE		DELETE	61 TIT		***	L	Change	Addition	
NAME			6.2 NA	ME				-	
STREET ADDRESS			. 6.3 STI	REET A	DDRESS				
CITY-ST-ZIP			6.4 CIT	TY-ST	- ZIP				

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 an address.

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4/23/98