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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90030 047 ***150.00

DOCUMENT # P9600053756

1. Corporation Name

A & R CABLE SERVICES INC.

į					
Principal Place	e of Business I	Mailing Address	- ,		
1761 NW 46TH AVE		1761 NW 46TH AVENUE		· ·	
APT. D-202		APT. D-202		DO NOT WRITE IN THIS SPACE	
LAUDERHILL FL 33313		LAUDERHILL FL 33313		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed	
U\$		US		l	
0 D-1-1-1 D	Land David and	2a. Mailing Address		06/24/1996 4. FEI Number	Applied For
	lace of Business				Not Applicable
21 Suite Ant	# 010	Suite, Apt. #, etc.		65-0682662	\$8.75 Additional
Suite, Apt. #, etc.		27		5. Certifcate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Inter	
24	25	_ _	10		☐Yes ☐No
24	9. Name and Address of Current		<u> </u>	10. Name and Address of New Registered A	gent
		<u> </u>	81 Name		
WOOLLERY, ANTHONY				(2.2.2.11)	
4510 NW 36TH ST, APT #211 LAUDERDALE LAKES FL 33319			82 Street Ad	Idress (P.O. Box Number is Not Acceptable)	
			83	· · · · · · · · · · · · · · · · · · ·	
			84 City	· FL	85 Zip Code
11 Purculant	to the provisions of Sections 607.050	2 and 607 1508. Florida Statutes	the above-named co	rporation submits this statement for the purpose of cl	hanging its registered
office or re	egistered agent, or both, in the State of	of Florida. Such change was aut	horized by the corpora	ation's board of directors. I hereby accept the appoint	ment as registered
agent. I ai	m familiar with, and accept the obligat	tions of, Section 607.0505, Florid	da Statutes.		
SIGNATURE	Signature, typed or printed name of registered agen	A and title of applicable (NOTE: P	Registered Agent signature requ	uired when reinstating) DATE	
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	P				
NAME		☐ DELETE	R 1.1 TITLE		Change Addition
16-04IL	WOOLLERY ANTHONY	☐ DELETE	1.1 TITLE		Change Addition
CTDEET ADDDEES	WOOLLERY, ANTHONY	☐ DELETE	1.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	1761 NW 46TH AVE #D-202	DELETE	1.2 NAME 1.3 STREET ADDRESS		Change
CITY-ST-ZIP	1761 NW 46TH AVE #D-202 LAUDERHILL FL 33313		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		Change Addition
CITY-ST-ZIP	1761 NW 46TH AVE #D-202 LAUDERHILL FL 33313 D		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE		
TITLE NAME	1761 NW 46TH AVE #D-202 LAUDERHILL FL 33313 D WOOLLERY, ROSETTA		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		
CITY-ST-ZIP TITLE NAME STREET ADDRESS	1761 NW 46TH AVE #D-202 LAUDERHILL FL 33313 D WOOLLERY, ROSETTA 1761 NW 46TH AVE, #D-202		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1761 NW 46TH AVE #D-202 LAUDERHILL FL 33313 D WOOLLERY, ROSETTA		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		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1761 NW 46TH AVE #D-202 LAUDERHILL FL 33313 D WOOLLERY, ROSETTA 1761 NW 46TH AVE, #D-202	DELETE	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		☐ Change ☐ Addition
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TOTTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1761 NW 46TH AVE #D-202 LAUDERHILL FL 33313 D WOOLLERY, ROSETTA 1761 NW 46TH AVE, #D-202 LAUDERHILL FL 33313	DELETE DELETE	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		Change Addition Change Addition Change Addition Change Addition

CITY-ST-ZIP

14. I hereby 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, with all other like empowered. CITY-ST-ZIP

Daytime Phone #