

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 02, 2004 8:00 am**  
**Secretary of State**

03-02-2004 90050 003 \*\*\*150.00

**DOCUMENT # P98000082436**

1. Entity Name

**UNITED CABLE COMMUNICATIONS GROUP OF ORLANDO, INC.**



Principal Place of Business

1405 POINSETTIA DRIVE  
SUITE 11  
DELRAY BEACH FL 33444  
US

Mailing Address

1405 POINSETTIA DRIVE  
SUITE 11  
DELRAY BEACH FL 33444  
US

64010740



MOORE CR2E034 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0875689

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DAGINELLA, GARY  
250 SW 13TH AVE  
POMPANO BEACH FL 33069

Name

Gary Daginella

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

1405 Poinsettia Dr. suite 11

City Delray Beach

FL

Zip Code

33444

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Gary Daginella*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-24-04

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME DAGINELLA, GARY  
STREET ADDRESS 2946 N.W. 60TH STREET.  
CITY-ST-ZIP FT. LAUDERDALE FL 33309

TITLE ☒ Change ☐ Addition  
NAME 1405 Poinsettia Dr suite 11  
STREET ADDRESS Delray Beach, FL 33444  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME CARRAFA, MICHAEL H  
STREET ADDRESS 2946 N.W. 60TH STREET.  
CITY-ST-ZIP FT. LAUDERDALE FL 33309

TITLE ☒ Change ☐ Addition  
NAME 1405 Poinsettia Dr suite 11  
STREET ADDRESS Delray Beach, FL 33444  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME TUCCIO, KENNETH  
STREET ADDRESS 2946 N.W. 60TH STREET.  
CITY-ST-ZIP FT. LAUDERDALE FL 33309

TITLE ☒ Change ☐ Addition  
NAME 1405 Poinsettia Dr suite 11  
STREET ADDRESS Delray Beach, FL 33444  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Gary Daginella*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-24-04