PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name RWCABLE, INC.



DOCUMENT # P98000094510

FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

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ISTON OF CORPORATIONS

99 JUL 29 PH 12: 57

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1158 SEDGEFIELD COURT 1158 SEDGEFIELD COURT OLDSMAR FL 34677 OLDSMAR FL 34677	DO NOT WRITE IN THIS SPACE
	3. Date Incorporated or Qualifed
	11/09/1998
2. Principal Place of Business 2a. Mailing Address	4. FEI Number Applied For
├─ ┐	59-354-0908 Not Applicable
26	\$8.75 Additional
22 27	5. Certificate of Status Desired Fee Required
City & State City & State	6. Election Campaign Financing \$5.00 May Be
28	Trust Fund Contribution L.J Added to Fees
Zip Country Zip Cour	Intry 8. This corporation owes the current year Intangible
24 25 29 30	Personal Property Tax. [] Yes [] No
9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
	81 Name
GASSMAN, ALAN S ESQ.	
1245 COURT STREET	82 Street Address (P.O. Box Number is Not Acceptable)
	83
CLEARWATER FL 33756	
	S4 City FL 85 Zip Code
SIGNATURE Signature, typed or printed name of registered agent and bille if applicable (NOTE: Registered	Agent signature required when reinstating) DATE
12. OFFICERS AND DIRECTORS 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D DELETE 1.1TIT	
NAME WATKINS, ROLAND	00/10/100
	TREET ADDRESS
	TY-ST-ZIP ****150.00 ****150.00
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NAME 22 NA	ME .
STREET ADDRESS 23 STI	TREET ADDRESS
CITY-ST-ZIP 2 4 CI	ITY-ST-ZIP
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NAME 32 NA	WE.
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CITY-ST-ZIP 34.CI	ITY-ST-ZIP
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CITY-ST-ZIP 34,CI TITLE DELETE 41TIT NAME 4 2 NF	TLE Change Additio
CITY-\$T-ZIP 34,CITY TITLE DELETE 41 TITY NAME 4 2 NA STREET ADDRESS 4 3 STI	TLE Change Additio

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Ftorida 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 ecceiver or trustee employered to execute this required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or go an attachment with appears prity all other like appears wered.

53 STREET ADDRESS

63 STREET ADDRESS

54 City-St-ZiP

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS CITY-\$1-ZIP

CITY-ST-ZF

TITLE NAME

Change

☐ Addition

DAILY & TSAGARIS, P.A.

Certified Public Accountants

TIMOTHY C. DAILY, C.P.A. JOHN S. TSAGARIS, C.P.A.

2555 Enterprise Rd. Suite 10 Clearwater, Florida 33763 (727) 791-1040 FAX (727) 726-8393

MEMBERS

FLORIDA INSTITUTOR
CERTIFIED PUBLIC ACCOUNTANTS

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCI INTANTS

July 19, 1999

Division of Corporations Annual Reports Filing P.O. Box 1500 Tallahassee, FL 32302-1500

Re:

RW Cable, Inc.

59-354-0908

Dear Sirs:

Enclosed with this letter are the taxpayer's 1999 Corporation Annual Report and a check in the amount of \$150.

The sole officer of the corporation, Roland Watkins, was gravely ill at the time the notice was due to be received and was unaware if it was, in fact, received. Therefore the taxpayer requests that the \$150 be applied for the year 1999, and that any penalties be abated. Please advise the taxpayer of this adjustment.

If you have any additional questions regarding this matter, please do not hesitate to contact me.

Very truly yours,

DAILY & TSAGARIS, PA

Timothy C. Daily, CPA

TCD/jh

Encl.

Cc: RW Cable, Inc.