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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
Division OF CORPORATIONS

DOCUMENT # V35401

(1)

Mailing Address

QUIET WATERS CABLEWAY, INC.

FILED
Mar 06 1997 8:00am
Secretary of State

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6601 N. POWER POMPANO BEA US	RLINE ROAD CH FL 33073-4209	PO BOX 39238 FT. LAUDERDALE FL 33339- US	9238				:	
03					3. Date Incorporated or Qualified 05/11/1992	3a. Date 02/08	of Last Re /1996	eport
2. Principal Pla	ice of Business	2a. Mailing Address			4. FEI Number			plied For
21		26			65-0334141			t Applicable
Suite, Apt. #	r, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 # Fee Re	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution		<b>\$5.00</b> Added t	
Z(p 24	Country 25	Zip 3	Countr 10	У		Yes 🗌	No	199.032,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Ag	ent	
BAX	TER, JACK A., JR.		81	Name				
	NORTH FEDERAL HIGHWAY		82	Street Add	ress (P.O. Box Number is Not Acceptat	ole)		
FT. I	AUDERDALE FL 33308							
			83	3				
			84	City		FL	<b>85</b> Zip (	Code
11. Pursuani t	o the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	s, the above	/e-named cor	poration submits this statement for the pation's board of directors. I hereby acce		nanging it ntment as	s registered
	rgistered agent, or both, in the state in familiar with, and accept the oblig	gations of, Section 607.0505, Flori	ida Statute	s.	poration submits this statement for the patients board of directors. I hereby acce	pi tito uppor		
SIGNATURE	Signature Typed or printed hand of registered as	gent and little if apol-cable (NOTE:	Registered Ag	jent signature requ	dred when reinstating)	DATE		<del> </del>
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND D	IRECTOR	
11118	DST	DELETE	1.1 TITLE				Change	Addition
NAME	GREATON, WILSON B., JR		1.2 NAME					
STREET ADDRESS	2601 E OAKLAND PARK BLV	TD .	1.3 STREE	T ADDRESS				
CITY+ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-	ST · ZIP				
TITLE	DP	DELETE	2.1 TITLE				Change	☐ Addilion
NAME	DORINI, DONALD K.		2.2 NAME					
STHELT ADDRESS	1720 S.E. 9TH ST.		2.3 STREE	T ADDRESS				
CITY: ST-ZIP	ft. Lauderdale fl		2. 4 CITY	- ST - ZIP				
TITLE	DV	DELETÉ	3.1 TITLE			L	_ Change	Addition
NAME	CLINE, ROBERT E.		3.2 NAME					
STREET ADDRESS	31 SENECA RD		3.3 STRE	ET ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL		3.4. CITY	- ST - ZIP				
TILLE		DELETE	4.1 TITLE		•	L.	_ Change	Addition
NAME			4 2 NAM					
STREET ADDRESS			4 3 STRE	ET ADDRESS				
CITY - \$1 - ZIP			4.4 CITY				T 01	The second
TITLE		☐ DELETE	5.1 TITLE	1.		L.	Change	Addition
NAME			5.2 NAMI					
STREET ADDRESS				ET ADDRESS				
CITY-ST-7IP		DE ETE	5.4 CITY				Change	Addition
TITLE		☐ DELETE	6.1 TITLE			L.	CHAILBS C	TT MODITION
NAME			6.2 NAM					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP		to a might state filling along the could	6 4 CiTY	-ST-7IP	ed in Section 119.07(3)(i), Florida Statut	ae Liudhar s	partify that	tho
2. 4	af a dha dha dha a taile an acadh acadh a	r nuantamental appual report in te	വര മെമ്മ് മറ	curata and th	at my signature shall have the same leg ort as required by Chapter 607, Florida	al enect as n	t mage ur	naer natn: mai

Wilson B. Greaton, Jr. 3/3/97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954/561-0313

Daytime Phone #