

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 24 AM 11:17

DOCUMENT # P23280 (1)

1. Corporation Name
CABLE DESIGN TECHNOLOGIES INC

Principal Place of Business	Mailing Address
661 ANDERSEN DR. FOSTER PLAZA 7 PITTSBURGH PA 15220 US	661 ANDERSEN DR. FOSTER PLAZA 7 PITTSBURGH PA 15220 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/06/1989	3a. Date of Last Report 03/03/1994
4. FEI Number 91-1351700	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Country
24. Zip	25. Country
29. Zip	30. Country

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301	81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City
	85. Zip Code

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 _____ (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VC	1. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRESSEY, BRIAN C.	1.2 NAME	CRESSEY BRYAN C.
STREET ADDRESS	120 S LASALLE ST, #630	1.3 STREET ADDRESS	600 STARS TOWER.
CITY - ST - ZIP	CHICAGO IL	1.4 CITY - ST - ZIP	CHICAGO, IL 60606
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OLSON, PAUL M.	2.2 NAME	
STREET ADDRESS	FOSTER PLAZA 7, 661 ANDERSEN DR	2.3 STREET ADDRESS	
CITY - ST - ZIP	PITTSBURG PA	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BANNAN, BERNARD J	3.2 NAME	
STREET ADDRESS	560 S SAN RAFAEL AVE	3.3 STREET ADDRESS	
CITY - ST - ZIP	PASADENA CA	3.4 CITY - ST - ZIP	
TITLE	SV	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALE, KEN	4.2 NAME	
STREET ADDRESS	FOSTER PLAZA 7, 661 ANDERSEN DR	4.3 STREET ADDRESS	
CITY - ST - ZIP	PITTSBURG PA	4.4 CITY - ST - ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARDEN, DAVE	5.2 NAME	
STREET ADDRESS	2833 WEST CHESTNUT	5.3 STREET ADDRESS	
CITY - ST - ZIP	WASHINGTON PA	5.4 CITY - ST - ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRIS, MICHAEL FO	6.2 NAME	
STREET ADDRESS	3140 BANK OF CA. CENTER	6.3 STREET ADDRESS	
CITY - ST - ZIP	SEATTLE WA	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(2)(b), 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 applicable, or on an attachment with an address.

SIGNATURE: *[Signature]* **Uice Pres.** 2/14/95

SIGNATURE AND TYPED OR PRINTED NAME OF HIGH OFFICER OR DIRECTOR