Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90122 035 \*\*\*150.00

## 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

## DOCUMENT # K78100

1. Corporation Name

GENERAL PAGING & TELECOMMUNICATIONS COMPANY, INC

Principal Place of Business Mailing Address P. O. BOX 2866 P. O. BOX 2866					
) HIALEAH FL 33   US	VIZ	HIALEAH FL 33012 US			DO NOT WRITE IN THIS SPACE
00					3. Date Incorporated or Qualifed
					04/06/1989
Principal Place of Business     2a. Mailing A			ling Address		4. FEI Number Applied For
21 26					65-0256492 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		\$8.75 Additional
22		27	27		5. Certificate of Status Desired Fee Required
City & Stat	e	City & State	. '		6. Election Campeign Financing \$5.00 May Be
23		28	28		Trust Fund Contribution Added to Fees
Zip Country		Zip			8. This corporation owes the current year Intangible
24	25	29	30		Personal Property Tax.
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registered Agent
				81 Name	
	VEZ, JUAN C			82 Street	Address (B.O. Boy Number is Not Acceptable)
516	SW 57 AVE #207			ozi Street /	Address (P.O. Box Number is Not Acceptable)
S207				83	
MIAN	MI FL 33126	$\wedge$			
	^	$\sim$ 11		84 City	FL 85 Zip Code
dd Durauant	to the provisions of Sections 607 Of	502 and 607 1508 Florida Sta	tutes the s	hove-named	corporation submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the Stat	te of Apprida. Such change was	s authorized	by the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the oblig	glations of, Section 607.0606, I	Florida Stat	utes.	1-15-99
SIGNATURE		MAN IN			
	Signature typed or printed name of registered a	<u> </u>		Agent signature n	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	P OFFICERS F	AND DIRECTORS DELETE	13 <u>.</u>	πε T	Change Addition
TITLE	CHAVEZ, CARMELINA	A Contract			
NAME	516 NW 57 AVE S207		1.2 N		
STREET ADDRESS	· ·			TREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	DELETE		TY-ST-ZIP	Paris 7 Addition
TITLE	OLIANGES INAMES	C DETEIL	2.1 ∏		President Addition
NAME	CHAVEZ, JUAN C		2.2 N	AME	
STREET ADDRESS	516 NW 57 AVE #207		2.3 S	TREET ADDRESS	
CITY-ST-ZIP.	_MIAMI FL		2.4 C	ITY-ST-ZIP	
TILE		DELETE:	3.1.17	التمنين الم	Change Addition
NAME			3.2 N	AME	
STREET ADDRESS			3.3 S	TREET ADDRESS	
CITY-ST-ZIP			3.4. C	ITY-ST-ZIP	
TILE		☐ DELETE	4.1 ∏	TLE	☐ Change ☐ Addition
NAME	{		4, 2 N	IAME	
STREET ADDRESS	1		4.3 \$	TREET ADDRESS	
CITY-ST-ZIP				ITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TI		☐ Change ☐ Addition
NAME			5.2 N		
				TREET ADDRESS	,
STREET ADDRESS			1	ITY-ST-ZIP	
CITY-ST-ZIP		☐ DELETE			Change Addition
TITLE	,		6.2 N		
NAME				TREET ADDRESS	
STREET ADDRESS	I		■ 0.35	IREE I ADDRESS	1

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 trusted employmental to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if ch ther like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

MRED