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 JAN 17 AM 11:16

DOCUMENT # **L97710** **(2)**

1. Corporation Name
CELLBEEP OF FLORIDA, INC.

Principal Place of Business
6783 S.W. 8TH STREET
MIAMI FL 33144

Mailing Address
6783 S.W. 8TH STREET
MIAMI FL 33144

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **09/05/1990**
3a. Date of Last Report: **02/15/1994**

2. Principal Place of Business (21)
2a. Mailing Address (26)
4. FEI Number: **65-0214056** — Applied For / Not Applicable

Suite, Apt. #, etc. (22) — Suite, Apt. #, etc. (27)
5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required

City & State (23) — City & State (28)
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

Zip (24) Country (25) — Zip (29) Country (30)
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
ZABALA, SANDALIO
241 W 33 ST
HIALEAH FL 33012

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — **FL** — 85 Zip Code

11. Pursuant to the provisions of Section 607.0501 and 607.0505, 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

12. OFFICERS AND DIRECTORS

PSD
ZABALA, SANDALIO
241 W 33 ST
HIALEAH FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 14.

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is accurately transcribed and 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 complete and that my signature shall have the same legal effect as if made under oath. That I am a director or officer 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 changed, or on an attached sheet if additional space is needed.

SIGNATURE: Sandalio Zabala
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-09-95 305-266-0086

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