## 5-18-98 B 7555 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

**1998** 

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B*allertham*

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400041533 (8) PAGING SPECIALISTS OF MIAMI I, INC. Principal Place of Business Mailing Address 2331 W 52ND ST 2331 W 52ND ST HIALEAH FL 33016 HIALEAH FL 33016 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/03/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0614245 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. ☐ Yes 26 29 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HERNANDEZ, REYBEL 529 W 46 PL **B2** Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33012 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** Signature: typed or priviled hance of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE HERDANDEZ, REYSE HERNANDEZ, REYBEL 1.2 NAME NAME 4810 SW 152 PL 487 529 W 46 PL STREET ADDRESS 1.3 STREET ADDRESS HIALEAH FL MiANI PL 33185 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE HERWADDEZ REGIST/ 49105W152 PL HET WHALL FL 33185 NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - \$1 - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition Change TITLE 5.1 TITLE 52 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 C(1Y - ST - Z(P Change ☐ Addition DELETE TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

14. Thereby 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 corrolation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter 607 in attribute 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 corrolation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter 607, Florida Statutes.

64 CITY-ST-ZIP

Moder

FILED

May 18 1998 8:00am

Secretary of State