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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L3806

(3)

PAGEPRO EXECUTIVE SERVICES, INC.

FILED Apr 30 1998 8:00am Secretary of State



Origoipal Place	o of Business	Mailing Address	·····			I KANISAFI BEN IIINI FURFI BEIN BEIN DINF BUREI DINI DI	- I CONTINE BEN IIINI ENEE RELIN ALIN NILE BENE NINI NINI NINI NINI BENE NINI			
Principal Place of Business * SARAH K. NEUMANN		•	% SARAH K. NEUMANN							
S1 8 MAIN AVE. STE 311 CLEARWATER FL 34625-0934		• • • • • • • • • • • • • • • • • • • •	51 S MAIN AVE. STE 311 CLEARWATER FL 34625-0934			DO NOT WRITE IN THIS SPACE				
OCCUMNICA LE 94050-0904		OCCUMENTED TO STORE				3. Date Incorporated or Qualified				
						01/02/1990				
Principal Pi	lace of Business	2a, Mailing Address				4. FEI Number	Ar	plied For		
21		26				59-2982786		ot Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.						Additional		
22		27				5. Certificate of Status Desired		equired		
City & State	9	···	City & State			6. Election Campaign Financing	\$5.00	May Be		
23		28	- ₁ '			Trust Fund Contribution		to Fees		
Zip	Country	Zip	Col	untry		8. This corporation owes or has paid the curre				
24	25	29	30	•		1 · · · · · · · · · · · · · · · · · · ·		J No		
ET.	g. Name and Address of Currer		1001	1	***	10. Name and Address of New Registered A				
NEUMANN, SARAH K. 1535 ERIN LANE										
		82 Street Add			Address (P.O. Box Number is Not Acceptable)					
CLEARWATER FL 34615				83						
				84	City		85 Zip	Code		
				$\perp \perp$		<u>FL</u>	<u> </u>			
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 printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE										
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AND				
TITLE	_		1.1 T	ITLE		L	Change	Addition		
NAME _.	Neumann, Sarah K.		1.2 NAME							
STREET ADDRESS	1535 ERIN LANE		1.3 STREET		ADDRESS					
CITY-ST-ZIP	<u> </u>		ITY-S	T-ZIP						
TITLE	DVT	☐ DELET e	DELETE 2.1 T			L	Change	Addition		
NAME	NEUMANN, MICHAEL E.		2.2 N	2.2 NAME 2.3 STREET ADDRESS				1		
STREET ADDRESS	1535 ERIN LANE		2.3 S			<i>;</i>		1		
CITY-ST-ZIP	CLEARWATER FL		2.40		ST-ZIP					
TITLE		☐ DELETE	DELETE 3.1 TIT				Change	☐ Addition		
NAME			3.2 N	IAME						
STREET ADDRESS			3.3 S	TREET	ADDRESS					
CITY-ST-ZIP			1	CITY-S						
TITLE	<u> </u>			ITLE			Change	Addition		
NAME			4.21	NAME						
STREET ADDRESS				-	ADDRESS					
CITY+ST+ZIP TITLE		DELE T E		4.4 CiTY-S 5.1 TITLE			Change	Addition		
l		□ perrit		5.1 THEE 5.2 NAME		_				
NAME					I D D D C C C					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		T pereze		ITY-S	T-ZIP		Change	Addition		
TITLE		DELE TE	6.1 T			L	Change	☐ Addition		
NAME			6.2 N	AME						
STREET ADDRESS			6.3 S	TREET	ADDRESS					
CITY-ST-ZIP			6.4 0	HTY-S	T-ZiP			j		

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 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 attachment with an address.