

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # M64860 (3)

1. Corporation Name

APOLLO BEEPERS, INC.



Principal Place of Business

Mailing Address

9810 SOUTH DIXIE HWY.
MIAMI FL 33156

9810 SOUTH DIXIE HWY.
MIAMI FL 33156

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

3. Date Incorporated or Qualified

01/13/1988

3a. Date of Last Report

01/13/1995

4. FEI Number

65-0029808

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HEVA, GERARDO

7855 NW 42TH ST. 1405 SW 107TH AVE #301-A
SUITE 215 MIAMI, FL 33174
MIAMI FL 33126

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1405 SW 107TH AVE #301-A

83

84 City

MIAMI

FL

85 Zip Code

33174

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 of person in charge of registered agent and chief executive officer

(Initials) Registered Agent signature required when reappointing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME: P
STREET ADDRESS: RUEDA, GERARDO
CITY-STATE-ZIP: 10067 SW 77TH CT. MIAMI FL

TITLE ☐ DELETE
NAME: V
STREET ADDRESS: MORALES, MIRIAM
CITY-STATE-ZIP: 10088 SW 77TH CT. MIAMI FL

TITLE ☐ DELETE
NAME: T
STREET ADDRESS: RUEDA, MARGOTH
CITY-STATE-ZIP: 10067 SW 77TH CT. MIAMI FL

TITLE ☐ DELETE
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE ☐ DELETE
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

TITLE ☐ DELETE
NAME:
STREET ADDRESS:
CITY-STATE-ZIP:

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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 Section 119.07(3)(k), 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.

SIGNATURE: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

G. RUEDA

✓ 1/26/96 ✓ 670-7428

Date

Telephone Number

CR2E034 (12/95)