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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

P92000014718 (0)

PAGERS PLUS INC.

Solite, Apr. II., etc. Solite, Apr. III., etc. Solite, Apr. III.,	\$819 HALLANDALE BEACH BLVD. HOLLYWOOD FL 33023 2. Principal Place of Business		PAGEN	5 PLUS INC.						
HOLLYWOOD FL 33023 HOLLYWOOD FL 33023 3. Date incorporated or Qualited 12/23/1992 3s. Date of Last Record 12/23/	## HOLLYWOOD FL 33023 ## HOLLYWOOD FL 33023 ## HOLLYWOOD FL 33023 Comment	Prin	cipal Flace of	Business	Mailing Address					
2. Principal Place of Business 2a. Mailing Address 2. Mailing Address 2. FEI Number 2. Applied For Sold Type 2. Appli	2. Principal Place of Business 2. 2a. Mailing Address 4. FEH Number 85-0875637 Suite, Apt. #, etc. 5. Conflicate of Status Desired Suite, Apt. #, etc. 5. Conflicate of Status Desired City & State 2. City & State 3. Country 3. City & State 3. City & Stat	5819 HALLANDALE BEACH BLVD. 5819 HALLANDALE BEACH					LVD.			
2. Principal Pisce of Business 22. Maining Authorises 26 Section April 4, etc. South, April 4, etc. So	22 Suite, Apt. #, etc. Suite, Apt. #, et									
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HOLLYWOOD FL 33025 Ba City Loxa harking Ba Zip Code 334770	HOLLYWOOD FL 33025 B3 B4 City Lova Latch ve		FELDMA	in, Kenneth B		82 Str	eet Address (P.O. Box Number	is Not Acceptable	e) 1/2.46	
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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)fk, 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 conforation or the recover 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 sunger, or once affect the statutes.

6 1 TITLE

62 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TILLE

NAME

Kenneth B. Feldman

DELETE

Addition