

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 12:01

DOCUMENT # **P93000006779 (1)**

1. Corporation Name
BEEPCHEAP, INC.

Principal Place of Business % BERKLEY BADGER 600 BY PASS DRIVE, SUITE 210 CLEARWATER FL 34624	Mailing Address % BERKLEY BADGER 600 BY PASS DRIVE, SUITE 210 CLEARWATER FL 34624
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/21/1993	3a. Date of Last Report 06/30/1994
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4. FEI Number 59-3161777	Applied For <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 21 4451 Park Blvd Suite, Apt. #, etc.	2a. Mailing Address 26 23494 US Hwy 19 N Suite, Apt. #, etc.
22 City & State Pinellas Park, FL	27 City & State Clearwater, FL
23 Zip 34665 Country USA	29 Zip 34625 Country USA

9. Name and Address of Current Registered Agent
**BADGER, BERKLEY
600 BY PASS DRIVE
SUITE 210
CLEARWATER FL 34624**

10. Name and Address of New Registered Agent

81 Name TONY R. WOODS
82 Street Address (P.O. Box Number is Not Acceptable) 11901 4th Street North, Apt 222
83 23494 U.S. Hwy 19 North
84 City St Petersburg Clearwater FL
85 Zip Code 34625

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]* **TONY R. WOODS, CEO** **4/26/95**
Signature typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when registering. DATE

12. OFFICERS AND DIRECTORS

TITLE D	NAME BADGER, BERKLEY C	STREET ADDRESS 324 WESTGATE RD	CITY ST ZIP TARPON SPGS FL
TITLE	NAME	STREET ADDRESS	CITY ST ZIP
TITLE	NAME	STREET ADDRESS	CITY ST ZIP
TITLE	NAME	STREET ADDRESS	CITY ST ZIP
TITLE	NAME	STREET ADDRESS	CITY ST ZIP
TITLE	NAME	STREET ADDRESS	CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE CEO + D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME TONY R. WOODS	
13 STREET ADDRESS 11901 4th Street North, Apt 222	
14 CITY - ST - ZIP St Petersburg, FL 33716	
21 TITLE COO + D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME MARK A. BLAKEY	
23 STREET ADDRESS 80 SYCAMORE CT	
24 CITY - ST - ZIP PALM HARBOR, FL 34683	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - 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 110.07(3)(b), 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]* **TONY R. WOODS** **4/26/95** **813-799-4418**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone)

REMITTED BY MAY 1