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 #

P93000080692 (5)

ABC PAGING, INC.

FILED May 12 1998 8:00am Secretary of State



Dringinal Plac	o of Business	Mailes Address			
Principal Place of Business Mailing Address					
16500 N.W. 52ND AVE. 16500 N.W. 52ND AVE. MIAMI FL 33014					
		MINIMI TE 00014		DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualified	
				11/19/1993	
		2a. Mailing Address		4. FEI Number	Applied For
21 26				65-0453431	Not Applicable
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country		Added to Fees
24	25	29 3	¬ '	This corporation owes or has paid the operational Property Tax due June 30.	Yes No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registers	
LAZAR, BRUCE E NEW ARDIZERS 81 Name					
1111 IMMONDO 2901 COLLIAIS ALIGNUT			VC 62 Street Ad	dross (D.O. Boy Number (a Mat Assessable)	
82 Street Address (P.O. Box Number is Not Acceptable)					
SUITE 500 SUITE M MAMI BEACH FL 33139 MIAMI BEACH, PL 33014 B3					
	MILITY	The second in the second			
			84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above named cornoration 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 profiled name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	POST	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	KUDEVIZ, JACK		1.2 NAME		
STREET ADDRESS	16500 NW 52ND AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY - ST - ZIP		
TITLE	VPD	☐ DELETE	2.1 TITLE		Change Addition
NAME	SIMON, RANDY		2.2 NAME		
STREET ADDRESS	16500 NW 52 AVE.		2.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL	I Ariese	2. 4 CITY-ST-ZIP		
TETLE	VPD	☐ DELETE	3.1 TITLE		Change Addition
NAME	KUDEVIZ, MICHAEL		3.2 NAME		
STREET ADDRESS	16500 NW 52ND AVE. MIAMI FL		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	VPD VPD	DELETE	3.4. CITY - ST - ZIP	110-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Change T 4 date:
NAME	BURNS, ANDREW	☐ OELETE	4.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS	16500 NW 52ND AVE.		4. 2 NAME		
	MIAMI FL		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	8450 M331 4 To	DELETE	4.4 CITY-ST-ZIP 5 1 TITLE		☐ Change ☐ Addition
NAME		C Detect			LI CHANGE LI AUGINORI
STREET ADDRESS			5.2 NAME		
City-St-ZIP			5.3 STREET ADDRESS		
TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME					Onlings Admits!
STREET ADDRESS			62 NAME		
			6.3 STREET ADDRESS		
14. I hereby c	ertify that the information supplied w	th this filing does not qualify for t	6.4 City-St-ZiP	n 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 eath; 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 changer, or on an attractment with an address.

14/20/98