## 2007 FOR PROFIT CORPORATION ANNUAL REPORT.

## DOCUMENT # P9400003176

SOUTH DADE BEEPERS, INC.

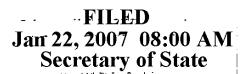


Principal Place of Business

20279 OLD CUTLER ROAD MIAMI, FL 33189

Mailing Address

20279 OLD CUTLER ROAD MIAMI, FL 33189





DO NOT WRITE IN THIS SPACE

01162007 CR2E034 (11/05) No Chg-P Applied For 4. FEI Number 65-0461085 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

RIVERA, CARLOS M

DO NOT WRITE 21368 SW 92 AVE MIAMI, FL 33189 IN THIS SPACE

8.	The above named entity submits this statement for the purpose of chang	ing its registered office or registered agent	or both	in the State of Florida.	i am familiar with	and accep
	the obligations of registered agent.	•				

Signature, typed or printed name of registered agent and like if applicable

6. Name and Address of Current Registered Agent

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

000000598386 01/24/07-80072-022 150.00

10. OFFICERS AND DIRECTORS TITLE RIVERA, CARLOS M NAME STREET ADDRESS 21368 SW92 AVE CITY-ST-ZIP MIAMI, FL 331893820 TITI F NAME RIVERA, MIRIAM STREET ADDRESS 21368 SW 92 AVE CITY-ST-ZIP MIAMI, FL 331893820 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

DO NOT WRITE IN THIS SPACE

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes: I further certify that the information indicated on this report or supplemental 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 cirector 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR