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**May 09 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P4000027391 (9) 1. Corporation Name PAGE SOURCE COMMUNICATIONS, INC.					
Principal Place of Business 1229 W. FLAGLER ST. MIAMI, FL. 33129			Mailing Address 1229 W. FLAGLER ST. MIAMI, FL. 33129		
2. Principal Place of Business 21 State, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 04/11/1994 3a. Date of Last Report 1996 4. FEI Number 65-0480613 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. 193, Florida Statutes ☐ Yes ☒ No	
9. Name and Address of Current Registered Agent LEONOR S. BELLO 1229 W. FLAGLER ST. MIAMI, FL. 33129			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 State 86 Zip Code		
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 (Type name of registered agent and state if applicable) (NOTE: Registered Agent's signature required when registering) (DATE)					
12. OFFICERS AND DIRECTORS 12.1 TITLE P/T/S/D ☐ DELETE 12.2 NAME BELLO, LEONOR S 12.3 STREET ADDRESS 1955 S.W. 5 AVE. 12.4 CITY-STATE-ZIP MIAMI, FL. 33129 12.5 TITLE ☐ DELETE 12.6 NAME 12.7 STREET ADDRESS 12.8 CITY-STATE-ZIP 12.9 TITLE ☐ DELETE 12.10 NAME 12.11 STREET ADDRESS 12.12 CITY-STATE-ZIP 12.13 TITLE ☐ DELETE 12.14 NAME 12.15 STREET ADDRESS 12.16 CITY-STATE-ZIP 12.17 TITLE ☐ DELETE 12.18 NAME 12.19 STREET ADDRESS 12.20 CITY-STATE-ZIP			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (11-12) 13.1 TITLE ☐ Change ☐ Add/In 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-STATE-ZIP 13.5 TITLE ☐ Change ☐ Add/In 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY-STATE-ZIP 13.9 TITLE ☐ Change ☐ Add/In 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY-STATE-ZIP 13.13 TITLE ☐ Change ☐ Add/In 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY-STATE-ZIP 13.17 TITLE ☐ Change ☐ Add/In 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY-STATE-ZIP 13.21 TITLE ☐ Change ☐ Add/In 13.22 NAME 13.23 STREET ADDRESS 13.24 CITY-STATE-ZIP 13.25 TITLE ☐ Change ☐ Add/In 13.26 NAME 13.27 STREET ADDRESS 13.28 CITY-STATE-ZIP 13.29 TITLE ☐ Change ☐ Add/In 13.30 NAME 13.31 STREET ADDRESS 13.32 CITY-STATE-ZIP 13.33 TITLE ☐ Change ☐ Add/In 13.34 NAME 13.35 STREET ADDRESS 13.36 CITY-STATE-ZIP 13.37 TITLE ☐ Change ☐ Add/In 13.38 NAME 13.39 STREET ADDRESS 13.40 CITY-STATE-ZIP 13.41 TITLE ☐ Change ☐ Add/In 13.42 NAME 13.43 STREET ADDRESS 13.44 CITY-STATE-ZIP 13.45 TITLE ☐ Change ☐ Add/In 13.46 NAME 13.47 STREET ADDRESS 13.48 CITY-STATE-ZIP 13.49 TITLE ☐ Change ☐ Add/In 13.50 NAME 13.51 STREET ADDRESS 13.52 CITY-STATE-ZIP 13.53 TITLE ☐ Change ☐ Add/In 13.54 NAME 13.55 STREET ADDRESS 13.56 CITY-STATE-ZIP 13.57 TITLE ☐ Change ☐ Add/In 13.58 NAME 13.59 STREET ADDRESS 13.60 CITY-STATE-ZIP 13.61 TITLE ☐ Change ☐ Add/In 13.62 NAME 13.63 STREET ADDRESS 13.64 CITY-STATE-ZIP 13.65 TITLE ☐ Change ☐ Add/In 13.66 NAME 13.67 STREET ADDRESS 13.68 CITY-STATE-ZIP 13.69 TITLE ☐ Change ☐ Add/In 13.70 NAME 13.71 STREET ADDRESS 13.72 CITY-STATE-ZIP 13.73 TITLE ☐ Change ☐ Add/In 13.74 NAME 13.75 STREET ADDRESS 13.76 CITY-STATE-ZIP 13.77 TITLE ☐ Change ☐ Add/In 13.78 NAME 13.79 STREET ADDRESS 13.80 CITY-STATE-ZIP 13.81 TITLE ☐ Change ☐ Add/In 13.82 NAME 13.83 STREET ADDRESS 13.84 CITY-STATE-ZIP 13.85 TITLE ☐ Change ☐ Add/In 13.86 NAME 13.87 STREET ADDRESS 13.88 CITY-STATE-ZIP 13.89 TITLE ☐ Change ☐ Add/In 13.90 NAME 13.91 STREET ADDRESS 13.92 CITY-STATE-ZIP 13.93 TITLE ☐ Change ☐ Add/In 13.94 NAME 13.95 STREET ADDRESS 13.96 CITY-STATE-ZIP 13.97 TITLE ☐ Change ☐ Add/In 13.98 NAME 13.99 STREET ADDRESS 13.100 CITY-STATE-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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, if 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: Leonor S. Bello Leonor S. Bello 4-29-97
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 100002186121
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