FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

2a. Mailing Address

26

1440 NORTH STATE RD. 7

MARGATE FL 33063-2847

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

1440 NORTH STATE ROAD 7

2. Principal Place of Business

MARGATE FL 33063

US

21



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000028334 (8)

TELEBEEPER CONNECTION, INC. OF BROWARD

Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 **Trust Fund Contribution** Added to Fees 28 $Z_{\rm IP}$ Country This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name VAZQUEZ, RAYMOND 1440 N STSTE ROAD 7 82 Street Address (P.O. Box Number is Not Acceptable) MARGATE FL 33063 83 84 City Zip Code 65 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 Signarius, typical or on ced had a of registered agent and life diapplicable (NOTE: Registered Agent signature required when re-instating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change Addition VAZQUEZ, RAYMOND NAME 12 NAME 1440 N STATE ROAD 7 13 STREET ADDRESS STREET ADDRESS MARGATE FL 33063 CITY - ST-ZIP 14 CITY-ST-ZIP DELETE Change Addition THIE 21 TITUE VAZQUEZ, RAYMOND NAV: 22 NAME 1440 NORTH STATE RD. 7 23 STREET ADDRESS STREET ADDRESS MARGATE FL 33063 CITY - \$1 - 7IP 2 4 CITY-ST-ZIP DELETE Change THE 3.1 TITLE ■ Addition NAME 32 NAME STREET ADDRESS **3.3 STREET ADDRESS** CITY - ST - ZIP 34. CITY-ST-ZIP DELETE ☐ Change ■ Addition TITLE 41 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CUTY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAVi 52 NAME STREET ADDRESS **53 STREET ADDRESS** City - ST - ZIP 54 CITY - ST-ZIP DELETE Addition TITLE 61 TITLE NAME 62 NAME STREET ADDRESS **63 STREET ADDRESS** CITY - ST - ZIE 64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in 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 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

SIGNATURE

SIGNAMORE AND TYPED OR PRINTED NAME OF SIGNING OF FICE OR DIRECTOR

GES (RAYMOND VAZWEZ)

1-27-97 954-977-7180

FILED

Feb 10 1997 8:00am

Secretary of State

3a. Date of Last Report

Applied For

Not Applicable

02/21/1996

3. Date Incorporated or Qualified

04/13/1994

65-0580106

4, FEI Number