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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 21 1997 8:00am

Secretary of State

305-621-6000

Date

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P9400062083 (8)**

PAGE NOW, INC.

SIGNATURE:

Principal Place of Business Mailing Address						-{			
18500 N.W. 52ND AVE. MIAMI FL 33014		16500 N.W. 52ND AVE. MIAMI FL 33014-6214	16500 N.W. 52ND AVE.						
						3. Date Incorporated or Qualified 08/22/1994	3a. Date of Last Report 02/09/1996		
2. Principa: P	lace of Business	28. Mailing Address			4. FEI Number			plied For	
21		26			65-0520511	Not Applicable			
Suite, Apt.		Suite, Apl. #, etc.	27			5. Certificate of Status Desired	d S8.75 Additional Fee Required		
City & State	(t	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
7ip	Country	Zip	Cou	intry		8. This corporation has fiability for it	ntangible ta	under s	. 199.032,
24	25 9. Name and Address of Curren	29	30	,		Florida Statutes Yes No 10. Name and Address of New Registered Agent			
1.47	AR, BRUCE E	t riegisterea Agent		81	Name	10. Name and Address of New Re	pistered Age	ent	
1111 LINCOLN RD.									
SUITE 500 MIAMI BEACH FL 33139				82	Street Addr	eet Address (P.O. Box Number is Not Acceptable)			***************************************
MIA	MI DEACH FL 33 138			83					
	,			84	City		FL		Code
office or ri	to the provisions of Sections 607,050 egistered agent or both, in the State milaniitiar with land accept the obliga	of Florida. Such change was	authorizei	d by	the corporati	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of ch t the appoin	anging it Iment as	s registered registered
SIGNATURE									
Signature Myrich or product name of respect enhanced and the chappingark. INOTE Repose 12. OF FICERS AND DIRECTORS 13.				d Age	nt signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EDC AND D	DECTOR	C IN 12
T TILE	VP CITIELIS AND	DELETE	1.1 Ti	T: F	·	ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	KUDEVIZ, MICHAEL		1.2 N/				h	, unungu	7 (001)1011
STREET ADDRESS	16500 NW 52ND AVENUE		1.3 SI	REFT	ADDRESS				
CITY-ST-ZIF	MIAMI FL		1 4 C	TY-S	T - ZiP				
HTLE	VP	☐ DELETE	2 1 TI	ILE				Change	Addition
NAME	BURNS, ANDREW		2 2 N/	ME					
STREET ADORESS	16500 NW 52ND AVENUE		2 3 SI	REE1	ADDRESS				
CITY-ST-ZIP	MIAMI FL STDP	- I - Const	2 4 C		ST - ZIP				
TITLE	KUDEVIZ, JACK	L DELETE	31 Ti				<u></u>	Change	L Addition
NAME STREET ADDRESS	16500 NW 52ND AVENUE		3.2 NAM						
CITY+ST ZIF	MIAMI EL		1		ADDRESS				
TITLE	VP	DELETE	3.4. C 4.1 TE		51-21			Change	Addition
NAME	SIMON, RANDY		4. 2 NAME					onango	, ridoribii
STREET ADORESS	10EAA BRM EARIN AVERNIE			4.3 STREET ADDRESS					
CHY-SI-ZIF	MIAMI FL		4.4 CITY-		,				
TITLE		☐ DELETE	5.1 Tr					Change	Addition
NAME			5.2 NAME						
STREET ACCRESS			5.3 STREE		ADDRESS				
CITY+ST ZIP	·		5.4 CHTY-		T - ZIP				
TITLE		DELETE	6.1 TO	TLE				Change	Addition
NAME			6.2 NAME						
STREET ADDRESS	6.3		6.3 SI	6.3 STREET ADDRESS					
CITY-SL-ZIF 6.4 CI 14. I do hereby certify that the information supplied with his filing does not qualify for the			TY-S	T - ZIP					
19. Lao hereb	by certify that the information supplied	s with this filing does not quali	ly for the	exe	mption stated	in Section 119.07(3)(i), Florida Statutes	i. I further ce	rtify 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 of the repeiver 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 chapted, proprint attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR