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Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000064087 (7)

1. Corporation Name
PAGECO INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
2400 E COMMERCIAL BLVD SUITE 630 FT LAUDERDALE FL 33308 US	2400 E COMMERCIAL BLVD SUITE 630 FT LAUDERDALE FL 33308 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/30/1994
4. FEI Number: 65-0519701 ☐ Applied For ☐ Not Applicable
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 owns or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business: 21 ___ Suite, Apt. #, etc 22 ___ City & State 23 ___ Zip 24 ___ Country 25 ___
2a. Mailing Address: 26 ___ Suite, Apt. #, etc 27 ___ City & State 28 ___ Zip 29 ___ Country 30 ___

9. **Name and Address of Current Registered Agent**

SADRIWALLA, DEBORAH
4351 NE 22 AVE
FT LAUDERDALE FL 33308

address Change

10. **Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 3070 NE 40 Court
83
84 City Ft. Lauderdale FL 85 Zip Code 33308

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: Deborah Sadriwalla Deborah Sadriwalla 1/28/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	SADRIWALLA, DEBORAH		1.2 NAME	
STREET ADDRESS	4351 NE 22 AVE		1.3 STREET ADDRESS	3070 NE 40 Court
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY-ST-ZIP	Ft. Lauderdale, FL. 33308
TITLE		☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. I 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Deborah Sadriwalla Deborah Sadriwalla 1/28/98 954-491-9501
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime phone # 0275986

CR2E034 (10/97)