SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	AL REPORT		DIVIS	SION OF COF	RPORATIO	NS					
DOCUM I. Corporation	MENT # P9500	0017	554	(3)							
BEEPER	FACTORY, INC.						E KERNAGON MIR TOTOL DINYA DOHIL BO			IAN 111k	
Principal Place of Business Mailing Address											
5917 MANATEE	5917	5917 MANATEE AVE. WEST SUITE 501 BRADENTON FL 34209									
SUITE 501 BRADENTON FL 34209 2. Principal Place of Business Suite, Apt #, etc 2. City & State							Date Incorporated or Qualified 3a. Date of Last Report 03/02/1995				
		├ ¬	2a. Mailing Address 26			4. FEI Number 59-3346881			Applied For Not Applicable		
		Si	Suite, Apt #, etc 27 City & State				5. Certificate of Status Desired		\$8.75 Additional		
							6. Election Campaign Financii		\$5.00 May Be		
Zip Country		├ ──1	Zip Country				Trust Fund Contribution 8. This corporation has liability	for intangibl		s 199	
1	9. Name and Address of Curre	29 ent Register	ed Agent		30		Florida Statutes 10. Name and Address of Ne	L			
1101	CH, ERNIE C				81	Name					
173		82 Street Ad			Street Add	dress (P.O. Box Number is Not Acceptable)					
	NDENTON FL 34205				83						
•						1			1221 3	ip Code	
•											
Pursuant to office or reagent. I an	o the provisions of Sections 607.05 egistered agent, or both, in the Stat in familiar with, and accept the oblig	502 and 607 to of Florida gations of, S	1508, Flo Such cha lection 60	orida Statutes, ange was autl 17.0505, Floric	, the above horized by da Statutes		poration submits this statement for lion's board of directors. Thereby ac	ne purpose o copt the app	f obonaioo	de roo.	stored
office or re agent I an SIGNATURE	o the provisions of Sections 607.05 gistered agent, or both, in the Stat in familiar with, and accept the oblig Signature types or protest carrier of registered a OFFICERS A	te of Florida gations of, S agent and title it as	Such cha lection 60	ange was auti 17.0505, Floric (NOTE)	, the above horized by da Statules	named corp the corporat	poration submits this statement for it ion's board of directors. Thereby ac ired when reastaing? ADDITIONS/CHANGES TO	ne purpose o coopt the app	ointment a	its registregistr	stered ered
office or reagent. I an SIGNATURE 12.	egistered agent, or both, in the Stat, in familiar with, and accept the oblig Signature types or protes rarrier of registered a OFFICERS A DP	te of Florida gations of, S agent and title it as	Such cha lection 60	ange was auti 17.0505, Floric	the above thorized by da Statutes Bigistered Agr.	named corp the corporat	ires when reastaing)	ne purpose o coopt the app	f changing pointment a	its registregistr	stered ered
office or reagent. I an SIGNATURE. 12. TITLE VAME	egistered agent, or both, in the Stat, in familiar with, and accept the oblig signature hyperconpension remaindering stand a OFFICERS A DP MEUWISSEN, MICHAEL P	te of Florida gations of, S agent and title it as	Such cha lection 60	ange was auti 17.0505, Floric (NOTE)	the above thorized by da Statutes Beginned Age 13. 11 TITLE	enamed corp the corporati	ires when reastaing)	ne purpose o coopt the app	ointment a	its registregistr	stered ered
office or reagent. I an SIGNATURE. 12. IIILE VAME STREET ADORESS	egistered agent, or both, in the Stat, in familiar with, and accept the oblig Signature types or profess return of registered a OFFICERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W.	te of Florida gations of, S agent and title it as	Such cha lection 60	ange was auti 17.0505, Floric (NOTE)	the above thorized by da Statutes Bigistered Agr.	named corporati	ires when reastaing)	ne purpose o coopt the app	ointment a	its registregistr	stered ered
office of reagent I an agent I an SIGNATURE 12. TITLE NAME STREET ADDRESS CITY - ST - ZIP	egistered agent, or both, in the Stat, in familiar with, and accept the oblig signature hyperconpension remaindering stand a OFFICERS A DP MEUWISSEN, MICHAEL P	te of Florida gations of, S agent and title it as	Such cha lection 60	ange was auti 17.0505, Floric (NOTE)	the above thorized by da Statutes Registered Age 13. 11 TITLE 12 NAME 1.3 STREET	named corporati	ires when reastaing)	ne purpose o coopt the app	ointment a	its registr	stered ered
office of reagent I an agent I an	egistered agent, or both, in the Stat, in familiar with, and accept the oblig stated a OFFICERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C	te of Florida gations of, S agent and title it as	Such cha lection 60	nge was aut 7.0505, Floric (Note I	the above thorized by da Statutes Beginned Age 13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME	named corporation	ires when reastaing)	ne purpose o coopt the app	f changing gintment a	its registr	stered ered - 12 Addition
office of reagent 1 and SIGNATURE 12. IITLE WAME STREET ADDRESS CITY-ST-ZIP TITLE WAME STREET ADDRESS	egistered agent, or both, in the Stat in familiar with, and accept the oblig Signature types or product return of registered a OF HCERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C 8121 11TH AVE. N.W.	te of Florida gations of, S agent and title it as	Such cha lection 60	nge was aut 7.0505, Floric (Note I	the above thorized by da Statutes Bigostored Age 13. 11 TITLE 12 NAME 1.3 STREET 1.4 CHY-S 2.1 TITLE 22 NAME 2.3 STREET	named corporation corporation of appearance responsibilities o	ires when reastaing)	ne purpose o coopt the app	f changing gintment a	its registr	stered ered 112 Addition
office of reagent 1 and SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	egistered agent, or both, in the Stat, in familiar with, and accept the oblig stated a OFFICERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C	te of Florida gations of, S agent and title it as	Such cha lection 60	nge was aut 7.0505, Floric (Note I	the above thorized by da Statutes Beginned Age 13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME	named corporation corporation of appearance responsibilities o	ires when reastaing)	ne purpose o coopt the app	f changing gintment a	its registion of the control of the	stered ered 112 Addition
office of reagent 1 an agent 1 an SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the Stat in familiar with, and accept the oblig Signature types or product return of registered a OF HCERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C 8121 11TH AVE. N.W.	te of Florida gations of, S agent and title it as	Such cha lection 60	PLETE	the above thorized by da Statules Figstred Age 13. 11 Title 12 NAME 13 STREET 14 City - S 21 Title 22 NAME 23 STREET 2 4 City	named corporation corporation of appearance responsibilities o	ires when reastaing)	ne purpose o coopt the app	ointment a	its registion of the control of the	stered ered 112 Addition Addition
office of reagent 1 and agent 1 and	egistered agent, or both, in the Stat in familiar with, and accept the oblig Signature types or product return of registered a OF HCERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C 8121 11TH AVE. N.W.	te of Florida gations of, S agent and title it as	Such cha lection 60	PLETE	the above thorized by da Statutes Tale	named corporation corporation of appearance responsibilities o	ires when reastaing)	ne purpose o coopt the app	ointment a	its registion of the control of the	stered ered 12 Addition Addition
office of reagent 1 and SIGNATURE 12. IITLE NAME STREET ADDRESS CITY-ST-ZIP IITLE NAME STREET ADDRESS CITY-ST-ZIP IITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	egistered agent, or both, in the Stat in familiar with, and accept the oblig Signature types or product return of registered a OF HCERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C 8121 11TH AVE. N.W.	te of Florida gations of, S agent and title it as	Such cha lection 60	DELETE DELETE DELETE	the above thorized by da Statules 13.	r ADDRESS ST-ZIP T ADDRESS	ires when reastaing)	ne purpose o coopt the app	ointment a	its registres registres on the control of the contr	stered ered - - 112 Addition Addition
office of reagent 1 and agent 1 and SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the Stat in familiar with, and accept the oblig Signature types or product return of registered a OF HCERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C 8121 11TH AVE. N.W.	te of Florida gations of, S agent and title it as	Such cha lection 60	PLETE	the above thorized by da Statules 13.	I ADDRESS ST-ZIP I ADDRESS ST-ZIP	ires when reastaing)	ne purpose o coopt the app	ointment a	its registres registres on the control of the contr	stered ered 12 Addition Addition
office of reagent 1 and SIGNATURE 12. IITLE IAME STREET ADDRESS CITY - ST - ZIP IITLE NAME STREET ADDRESS CITY - ST - ZIP IITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME	egistered agent, or both, in the Stat in familiar with, and accept the oblig Signature types or product return of registered a OF HCERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C 8121 11TH AVE. N.W.	te of Florida gations of, S agent and title it as	Such cha lection 60	DELETE DELETE DELETE	Heads and the second of the se	I ADDRESS ST-ZIP I ADDRESS ST-ZIP	ires when reastaing)	ne purpose o coopt the app	ointment a	its registres registres on the control of the contr	stered ered - - - - - - - - - - - - - - - - - - -
Office of reagent. I an SIGNATURE 12. III.E IIII	egistered agent, or both, in the Stat in familiar with, and accept the oblig Signature types or product return of registered a OF HCERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C 8121 11TH AVE. N.W.	te of Florida gations of, S agent and title it as	Such cha lection 60	DELETE DELETE DELETE	Heads and the second of the se	Famed corporation from the corporation of signature from the corporation o	ires when reastaing)	ne purpose o coopt the app	ointment a	its registres registres on the control of the contr	stered ered - - - - - - - - - - - - - - - - - - -
Office of the agent it an agent it and agent it an agent it and agent it and agent it and agent it and agent it an agent it and agent it and agent it and agent it and agent it an agent it and agent it and agent it and agent it and agent it an agent it and agent it and agent it and agent it and agent it an agent it and agent it and agent it and agent it and agent it an agent it and agent it and agent it and agent it and agent it an agent it and agent it and agent it and agent it and agent it an agent it and agent it and agent it and agent it and agent it an agent it and agent it and agent it and agent it and agent it an agent it and agent it and agent it and agent it and agent it an agent it and agent it and agent it and agent it and agent it an agent it and agent it and agent it and agent it and agent it ag	egistered agent, or both, in the Stat in familiar with, and accept the oblig Signature types or product return of registered a OF HCERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C 8121 11TH AVE. N.W.	te of Florida gations of, S agent and title it as	Such cha lection 60	DELETE DELETE DELETE	the above thorized by da Statules Bigish ed Agil 13. 11 Tiffe 12 NAME 13 STREET 14 CITY-S 21 TIFFE 22 NAME 23 STREET 24 CITY- 31 TIFFE 32 NAME 33 STREET 34 CITY- 4.1 TIFFE 4 2 NAME 4 3 STREET	Famed corporation from the corporation of signature from the corporation o	ires when reastaing)	ne purpose o coopt the app	ointment a	or its registress regi	stered ered - - - - - - - - - - - - - - - - - - -
office of reagent 1 and SIGNATURE 12. IITLE VAME 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 TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE	egistered agent, or both, in the Stat in familiar with, and accept the oblig Signature types or product return of registered a OF HCERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C 8121 11TH AVE. N.W.	te of Florida gations of, S agent and title it as	Such cha lection 60	DELETE DELETE DELETE	He above thorized by da Statules 13. 11 Tiffe 12 NAME 13 STREET 14 CHY-S 21 TIFFE 22 NAME 23 STREET 24 CHY-S 31 TIFFE 34 CHY- 4.1 TIFFE 42 NAME 43 STREET 44 CHY- 51 TIFFE 52 NAME	Framed corporation required separation require	ires when reastaing)	ne purpose o coopt the app	of changing cointment a	or its registress regi	stered ered - 112 Addition Addition Addition
Office of reagent 1 and SIGNATURE 12. ITILE 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 TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME	egistered agent, or both, in the Stat in familiar with, and accept the oblig Signature types or product return of registered a OF HCERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C 8121 11TH AVE. N.W.	te of Florida gations of, S agent and title it as	Such cha lection 60	DELETE DELETE DELETE	the above thorized by da Statules 13. 11 TITLE 12 NAME 1.3 STREET 1.4 CHY-S 2.1 TITLE 22 NAME 2.3 STREET 2.4 CHY- 3.1 TITLE 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CHY- 5.1 TITLE 5.2 NAME 5.3 STREET 5.3 STREET 5.4 CHY- 5.5 TITLE 5.5 NAME 5.5 STREET	Framed corporate the corporate separate responsible to the corporate separate responsible to the corporate separate responsible to the corporate separate se	ires when reastaing)	ne purpose o coopt the app	of changing cointment a	or its registress regi	stered ered - 112 Addition Addition Addition
Office of reagent I an agent I an agent I an SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the Stat in familiar with, and accept the oblig Signature types or product return of registered a OF HCERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C 8121 11TH AVE. N.W.	te of Florida gations of, S agent and title it as	Such cha lection 60	DELETE DELETE DELETE DELETE DELETE	Higher ed Age 13. 11 Tiffe 12 NAME 13 STREET 14 CITY-S 21 TIFFE 22 NAME 23 STREET 24 CITY-S 31 TIFFE 42 NAME 43 STREET 44 CITY-S 51 TIFFE 52 NAME 53 STREET 54 CITY-S 51 TIFFE 52 NAME 53 STREET 54 CITY-S 51 TIFFE 52 NAME	Framed corporate the corporate separate responsible to the corporate separate responsible to the corporate separate responsible to the corporate separate se	ires when reastaing)	ne purpose o coopt the app	of changing cointment a	ors in ge	stered ered - 112 Addition Addition Addition
Office of reagent. I an agent.	egistered agent, or both, in the Stat in familiar with, and accept the oblig Signature types or product return of registered a OF HCERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C 8121 11TH AVE. N.W.	te of Florida gations of, S agent and title it as	Such cha lection 60	DELETE DELETE DELETE	the above thorized by da Statules 13. 11 TITLE 12 NAME 1.3 STREET 1.4 CHY-S 2.1 TITLE 22 NAME 2.3 STREET 2.4 CHY- 3.1 TITLE 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CHY- 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CHY- 6.1 TITLE 5.4 CHY- 6.1 TITLE 5.5 NAME 5.6 TITLE 5.7 NAME 5.7	T ADDRESS ST-ZIP	ires when reastaing)	ne purpose o coopt the app	Chan	ors in ge	stered ered 112 Addition Addition Addition Addition
Office of reagent I an agent I an	egistered agent, or both, in the Stat in familiar with, and accept the oblig Signature types or product return of registered a OF HCERS A DP MEUWISSEN, MICHAEL P 403 46TH ST. N.W. BRADENTON FL 34209 DST JONES, JENNIFER C 8121 11TH AVE. N.W.	te of Florida gations of, S agent and title it as	Such cha lection 60	DELETE DELETE DELETE DELETE DELETE	the above thorized by da Statules 13. 11 TITLE 12 NAME 1.3 STREET 1.4 CHY-S 2.1 TITLE 22 NAME 2.3 STREET 2.4 CHY- 3.1 TITLE 32 NAME 3.3 STREET 4.4 CHY- 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CHY- 6.1 TITLE 5.2 NAME	T ADDRESS ST-ZIP	ires when reastaing)	ne purpose o coopt the app	Chan	ors in ge	stered ered 112 Addition Addition Addition Addition

SIGNATURE:

14. I do hereby certify that the information supplied will further certify that the information indicated on this made under oath, that I am a politicer of kirrector of that my name appears in Block 12 or thick 13 I g i.a.

SIGN TURE AND TY ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-27-96 941-795-5454