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Apr 25 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 # P95000046761 (9)

1. Corporation Name

A & H BEEPER & CELLULAR ACCESSORIES, INC.

Principal Place of Business

Mailing Address

A & H BEEPERS
766 RIVERSIDE DR
CORAL SPRINGS FL 33071

A & H BEEPERS
766 RIVERSIDE DR
CORAL SPRINGS FL 33071-7008

3. Date Incorporated or Qualified 06/12/1995
3a. Date of Last Report 08/29/1996

4. FEI Number 65-0591446
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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALI, SUHAD
766 RIVERSIDE DR
CORAL SPRINGS FL 33071

81 Name ALI, HASAN
82 Street Address (P.O. Box Number is Not Acceptable) 766 Riverside Drive.
83 Coral Springs
84 City FL 85 Zip Code 33071

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 *Ali Hasan Ali* HASAN ALI President DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PT	<input checked="" type="checkbox"/> DELETE
NAME	ALI, SUHAD	
STREET ADDRESS	766 RIVERSIDE DR	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	QUOMA, HELENE	
STREET ADDRESS	766 RIVERSIDE DR	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	S	<input type="checkbox"/> DELETE
NAME	QUOMA, RONALD	
STREET ADDRESS	766 RIVERSIDE DR	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11 TITLE	PT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	ALI, HASAN	
13 STREET ADDRESS	766 Riverside Drive	
14 CITY-ST-ZIP	Coral Springs, FL 33071	
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
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 appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: *Ali Hasan Ali* HASAN ALI 1/11/97 954-753-4496

CR2E034 (9/96)