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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000077727 (2)

COMPUTECH & BEEPERS, INC.

FILED May 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address													.11 18819 1	1011 1001 1001		
917 S.W. 87TH AVE. MIAMI FL 33174				917 S.W. 87TH AVE. MIAMI FL 33174						DO NOT WRIT	EINT	THIS SPA	CE			
										 Date Incorporated or Qualified 10/06/1995 						
2. Principal P	lace of Busines		2s. Mailing Address					-+	4. FEI Number Applie					┨		
21				26						65-0669276				Not Applicable		
Sulte, Apt. #, etc.				Suite, Apt. #, etc.					$\neg \neg$		С	1 5		Additional	٦	
22				27					l	5. Certificate of Status Desired	L	1 .	Fee R	tequired		
City & State				City & State						6. Election Campaign Financing			\$5.00	May Be		
23				28						Trust Fund Contribution]	Added	to Fees		
Zip	Country			h			Country			8. This corporation owes or has p						
24	9. Name and Address of Current			29 30						Personal Property Tax due Jun		X		□ No	_	
	· · · · · · · · · · · · · · · · · · ·		Current He	gister	ed Agent		B1	Name		10. Name and Address of New R	egist	erea Age	nt		+	
	CHMAN, JASI							Name								
1	7 S.W. 87TH					B2	Street A	Addres	s (P.O. Box Number is Not Accepte	able)				1		
MI	AMI FL 33174	1					B3	,		****				 	+	
							84	City				FL 8	5 Zip	Code		
11. Pursuant	to the provision	ns of Sections	607.0502 an	d 607.	1508, Florida Statu	ites, the a	pove	-named	corpor	ation submits this statement for the	purpo	se of ch	anging	its registered	1	
office or r agent. I a	registered ager am familiar with,	it, or both, in ti , and accept ti	ne State of F ne obligation	lorida. is of, Si	Such change was ection 607.0505, F	authorize Iorida Sta	d by tutes	the corp	ooration	i's board of directors. I hereby accor-	ept the	e appoint	ment as	s registered		
SIGNATURE			-													
	Signature, typed or						d Age	nt signature r	berioper	when reinstaling)		ATE DI	DEOTO	00 11 10	<u>اؤ</u>	
12.	В	OFFICI	ERS AND DI	HLUTC	DELETE	13. 11 T	TI E	—т		ADDITIONS/CHANGES TO OFF	IUERS		Change	Addition	- }	
NAME	DICHMAN	I IAZMINI				1.2 N							Unango	L Addition	֓֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	
STREET ADDRESS	RICHMAN, JAZMIN 917 S.W. 87TH AVE.						STREET ADDRESS							8		
CITY-ST-ZIP	MIAMI FL						ITY-S								Š	
TITLE	<u> </u>				☐ DELETE	2.1 1	• • • • • • • • • • • • • • • • • • • •						Change	☐ Addition	{	
NAME						22 N	AME									
STREET ADDRESS						235	TREET	ADDRESS							Ì	
CITY-ST-ZIP	ļ					2 4 0	OITY-S	T-ZIP							╛	
TITLE					DELETË	317	TLE						Change	Addition		
NAME						3.2 N	AME									
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TITLE					∐ DELET e	41T		ŀ				Ц	Change	☐ Addition		
NAME OTOGET LODDEGG						4.21		*DDDCO								
STREET ADDRESS								ADDRESS								
CITY-\$T-ZIP TITLE	-		·····		DELETE	5.1 T	ITY-S	1-215					Change	☐ Addition	-	
NAME						52 N						_	J			
STREET ADDRESS								ADDRESS								
CITY-ST-ZIP							ITY-S									
TITLE					DELETE	611				<u> </u>			Change	☐ Addition	1	
NAME						62 N										
STREET ADDRESS						1		ADDRESS								
CITY-ST-ZIP						640	ITY-S	1 - ZIP								
	certify that the i	oformation sur	notion with the	nis filine	does not qualify	for the ex	empi	ion state	d in Se	ction 119 07(3)(i) Florida Statutes	Lfurth	er certify	that th	e information	7	

Indicated on this annual report or supplied with this ming does not quality for the exemption stated in Section 1.19.07(5)(), Florida Statutes. Further certify that feel information indicated on this annual report is 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.

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