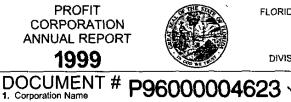
PROFIT CORPORATION ANNUAL REPORT

1999

CORPORATE BEEPERS, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

DIVISION OF CORPORATIONS

## Secretary of State

## Jul 15, 1999 8:00 am Secretary of State

07-15-1999 90010 013 \*\*\*550.00

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Principal Place of Business Mailing Address 1720 SW 72ND COURT 1720 SW 72ND COURT MIAMI FL 33155 MIAMI FL 33155 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/11/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For Not Applicable 26 65-0648774 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Zip Country Country Zip 8. This corporation owes the current year Intangible Personal Property. Yes 29 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DUVAL, HECTOR A 82 Street Address (P.O. Box Number is Not Acceptable) 1720 SW 72ND COURT **MIAMI FL 33155** 83 84 City Zip Code 85 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. 1.1 TITLE TITLE DELETE ✔ Change DUVAL, HECTOR A. DUVAL, HECTOR A 1.2 NAME NAME 1049 N.W. 129 AVE 1720 SW 72ND COURT 1.3 STREET ADDRESS STREET ADDRESS 4:AMI FX. 33182 **MIAMI FL 33155** 1.4 CITY-ST-ZIP CITY-ST-ZIP 2.1 TITLE TITLE DELETE POULOS, STEVE J 2.2 NAME NAME 1720 SW 72ND COURT 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33155** 2.4 CITY-ST-ZIP CITY-ST-ZIP 3,1 TITLE TITLE \_\_\_ DELETE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP 4.1 TITLE TITLE DELETE Change Addition 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change 5.1 TITLE DELETE Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CiTY-ST-ZIP TITLE DELETE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (5/99)