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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600004714 (7)

THE FRENCH PAGES, INC.

CITY-ST-ZIP

SIGNATURE:

14. I do heroby certify that the information supplied with information indicated on this annual report or sup y I am an officer or director of the corporation or the appears in Block 12 or Block 13 if changed, or of

SIGNATURE AND THEED OR

Principal Place of Business Mailing Address 1000 WEST AVENUE. SUITE 516 343 ALMERIA AVENUE **CORAL GABLES FL 33134** MIAMI BEACH FL 33139-4718 Sa. Date of Last Report 3. Date Incorporated or Qualified 01/16/1996 2. Principa! Place of Business 2a. Mailing Address EEI Number Applied For 05-0634 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 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 This corporation has liability for intangible tax under s. 199.032, Yes 🖊 No Florida Statutes 29 30 24 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 81 Name 343 ALMERIA AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33134 83 84 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) 12. 13. PSTD DELETE Change Addition 1.1 TITLE THE SCHELL, PATRICK G 1.2 NAME CR2E034 NAMÉ 343 ALMERIA AVENUE STREET ADDRESS 1.3 STREET ADDRESS CORAL GABLES FL 33134 CITY-ST-ZIP 1.4 C/JY - ST - 7/F DELETE Change Addition 21 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CHY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST-ZIP CITY - \$1 - 7(P DELETE Change Addition TIJ. F 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 City - St - ZIP CITY-ST-ZIF DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAM: 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

6.4 CITY-ST-ZIP

hment with an address.

FINED NAME OF SIGNING OFFICER OR DIRECTOR

filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the tal annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

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