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Jan 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000018390 (0)

1. Corporation Name
PAGECOM CELLULAR, INC.



Principal Place of Business
2423 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020

Mailing Address
2423 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020-6805

3. Date Incorporated or Qualified
02/28/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 1919 N. PINE ISLAND RD.

26 1919 N. PINE ISLAND RD.

4. FEI Number

65-0646362

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

22 City & State PLANTATION FL

27 City & State PLANTATION FL

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

23 ~~PLANTATION~~

28 ~~PLANTATION~~

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

24 33322

Country

25 U.S.A.

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KAUFMAN, DANIEL
2423 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 of person printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME D KAUFMAN, DAVID
STREET ADDRESS 2423 HOLLYWOOD BLVD.
CITY- ST- ZIP HOLLYWOOD FL 33020

1.1 TITLE
1.2 NAME D/8/15
1.3 STREET ADDRESS DANIEL KAUFMAN
1.4 CITY- ST- ZIP 1919 N. PINE ISLAND RD.
PLANTATION FL 33322

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANIEL KAUFMAN - PRES

1-10-97

(954) 922-4010

Date

Daytime Phone #

CR2E034 (9/96)