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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000045762 (7)

FILED Jan 28 1998 8:00am Secretary of State

| UNIVERSAL BEEPERS EXPRESS. | ING. | | | |
|---|------------------------------|----------------|----------------------------|--|
| Principal Place of Business | Mailing Address | | | |
| 100 S CONGRESS AVE | 100 S CONGRESS AV | F | | |
| DELRAY BEACH FL 33445 DELRAY BEACH FL 33445 | | | DO NOT WRITE IN THIS SPACE | |
| | | | | 3. Date Incorporated or Qualified |
| | | | | 05/23/1996 |
| 2. Principal Place of Business 2a. Mailing Address | | | | 4. FEI Number Applied For |
| 21 26 | | | | 65-0669835 Not Applicable |
| Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired \$8.75 Additional |
| 27 | | | | Fee Hequired |
| City & State City & State | | | | 6. Election Campaign Financing \$5.00 May Be |
| 23 Country | Country Zip Country | | | Trust Fund Contribution |
| Zip Country 25 | 29 | · | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30, Yes No |
| g. Name and Address of Curre | | _ [30] | | 10. Name and Address of New Registered Agent |
| | | 6 | 1 Name | To. Tallow and the same of the |
| KHAIL, SAED | | | | |
| 100 S CONGRESS AVE | | 8 | 2 Street Addre | ess (P.O. Box Number is Not Acceptable) |
| DELRAY BEACH FL 33345 | | 6 | 3 | |
| | | _ | | |
| | | 8 | 4 City | FL 85 Zip Code |
| office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig SIGNATURE Signalure, by 80 or printed figure of registered ag | ations of, Section 607.0505, | Florida Statut | by the corporations. | oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered IQ G C DATE |
| 12. OFFICERS AN | D DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE D | DELETE | 1.1 TITLE | | Change Addition |
| NAME KHAIL, SAED | 1.2 NAM | | Ē | |
| STREET ADDRESS 100 S CONGRESS AVE | | | et address | |
| CITY-ST-ZIP DELRAY BEACH FL 33345 | | 1.4 CITY | -ST-ZIP | |
| TITLE | ☐ DELETE | 2.1 TITLE | | Change Addition |
| NAME | | 2.2 NAM | E | |
| STREET ADDRESS | | 2.3 STRE | et address | |
| CITY-ST-ZIP | | 2. 4 CITY | | |
| TITLE | ☐ DELETE | 3.1 T(TLE | ĺ | Change Addition |
| NAME | | 3.2 NAM | | |
| STREET ADDRESS | | 3.3 STRE | ET ADDRESS | |
| CITY-ST-ZIP | T DELETE | 3.4, CITY | | |
| TITLE | DELETE | 4.1 TITLE | | Change Addition |
| NAME | | 4. 2 NAM | • | |
| STREET ADDRESS | | | ET ADORESS | |
| CITY-ST-ZIP | DELETE | 4.4 City | | ☐ Change ☐ Addition |
| TITLE | | 5.1 TITLE | | Change Addition |
| NAME OVERTY ADDRESS | | 5.2 NAM | | |
| STREET ADDRESS | | | ET ADDRESS | |
| CITY-ST-ZIP | DELETE | 5.4 CITY | | Change Addition |
| TITLE | TH PETELE | 6.1 TITLE | | L.I. Change L.I. Addition |
| NAME OTOGET ADDRESS | | 6.2 NAMI | | |
| STREET ADDRESS | | | ET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY | | Section 119.07(3)(i), Florida Stalutes. I further certify that the information |

indicated on this annual report or supplied with this ming does not qualify for the exemption stated in section 119.07(5)(f), Fioritia statutes: Truther certify that the informatic 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.

(561)265-1190