


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

APPROVED
AND
FILED

Pg. 1072

97 JUL -2 PM 3:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

* PROFIT CORPORATION ANNUAL REPORT 1997.		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # <i>P96000066840</i> 1. Corporation Name <i>EVR Paging & Electronics</i>		

Principal Place of Business	Mailing Address
<i>9401 S.W. 4th #107 Miami FL 33174</i>	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 <i>9401 S.W. 4th</i>
22 City & State	27 <i>107</i>
23 Zip	28 <i>Miami, FL</i>
24 Country	29 <i>33174</i>
25	30

3. Date Incorporated or Qualified	3a. Date of Last Report
	<i>N/A</i>
4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent	

10. Name and Address of New Registered Agent	
81 Name	<i>Efrain Vera</i>
82 Street Address (P.O. Box Number is Not Acceptable)	<i>9401 S.W. 4th #107</i>
83	
84 City	<i>Miami</i>
85 Zip Code	<i>FL 33174</i>

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]* (NOTE: Registered Agent signature required when registering) DATE *6/15/97*

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	<i>President</i>
STREET ADDRESS	<i>EFRAIN VERA</i>
CITY-ST-ZIP	<i>9401 S.W. 4th #107</i>
	<i>Miami FL 33174</i>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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, and an attachment with an address.

SIGNATURE: *[Signature]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE *6/15/97* Daytime Phone #

CR2E034 (9/96)

**EVR PAGING &
ELECTRONICS**

P.O. Box 141634
Coral Gables, FL 33114

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June 15, 1997

Annual Reports Filings
Division of Corporations
Post Office Box 1500
Tallahassee, Florida 32302-1500

Dear Sir or Madam:

Subject: Annual Reports Filings

The reason for filing this letter is to explain why my payment is coming in so late. I have a corporation which I am starting to operate now in June of 1997. I went to my accountant to set up all the paper work to start operating and that is when she asked me about the annual reports fees. I was not aware of this and I **never received** any notice or bill by mail. I called your office and spoke to the clerk who advised me to call an automated number and order the form. She instructed me to fill it out and mail it with a \$165.00 check and stating why it was late. She said that probably the notice got lost in the mail therefore I would not have to pay the late fee of \$550.00.

I appreciate the help with this matter and I will make sure that my dues are on time on the years to come.

Sincerely,



Efrain Vera
President

Cc: Business File, Accountant, Tallahassee

Attachments

Filing fee form

Letter

Check for \$165.00