


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

FILED

May 02 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P96000066898 (3)**

1. Corporation Name  
**RADIOPAGE INTERNATIONAL, INC.**

Principal Place of Business <b>STE. 1830, 110 SE 6TH ST. FT. LAUDERDALE FL 33301</b>	Mailing Address <b>STE. 1830, 110 SE 6TH ST. FT. LAUDERDALE FL 33301-5001</b>
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2. Principal Place of Business 21 <b>9834 Glades Rd</b> Suite, Apt. #, etc. <b># C 1</b> City & State <b>Boca Raton, FL</b> Zip <b>33434</b> Country <b>USA</b>		2a. Mailing Address 26 <b>9834 Glades Rd.</b> Suite, Apt. #, etc. <b># C 1</b> City & State <b>Boca Raton, FL</b> Zip <b>33434</b> Country <b>USA</b>		3. Date Incorporated or Qualified <b>08/12/1996</b>	3a. Date of Last Report
4. FEI Number <b>65-0687848</b>		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent <b>FILINGS, INC.</b> <b>3732 NW 16TH ST.</b> <b>FT. LAUDERDALE FL 33311</b>		10. Name and Address of New Registered Agent 81 Name <b>Michael A. Petro President</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>9834 Glades Rd. # C 1</b> 83 84 City <b>Boca Raton, FL</b> 85 Zip Code <b>33434</b>	
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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: *Michael A. Petro* **Michael A. Petro** DATE: **4/4/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>D PETRO, MICHAEL A</b>	1.2 NAME	
STREET ADDRESS	<b>STE. 1830, 110 SE 6TH ST.</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>FT. LAUDERDALE FL 33301</b>	1.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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: *Michael A. Petro* **Michael A. Petro President** DATE: **4/4/97** Daytime Phone #: **561-477-8989**

CR2E034 (9/96)