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

**PROFIT CORPORATION ANNUAL REPORT** 1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000069537 (4) BEEPER WAREHOUSE, INC.

Principal Place of Business

Mailing Address

701 SW 27 AVE., 10TH FLOOR MIAMI FL 23134

701 SW 27 AVE., 10TH FLOOR MIAMI FL 33135-3025

## **FILED** May 13 1997 8:00am Secretary of State



	•		MICHITE OVIOUS			
						Date Incorporated or Qualified     3a. Date of Last Report     08/21/1996
	Place of Business		2s. Mailing Address			4. FEI Number Applied For
21			26			65-0404-334 Not Applicable
Sulte, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
City & State			27			Fee Required
<del></del>			City & State			6. Election Campaign Financing \$5.00 May Be
23 Zip	····	Country	Zip	Cour	nhe.	Trust Fund Contribution L. Added to Fees
24	25	Country	<del></del>	<b>├</b> ─┐	wy	8. This corporation has liability for intangible tax under s. 199.032,
241		Address of Current I	29  Registered Agent	30		Florida Statutes  Yes No  10. Name and Address of New Registered Agent
ŌBF	REGON, ANA				81 Name	· · · · · · · · · · · · · · · · · · ·
701 SW 27 AVE., 10TH FLOOR						
	MI FL 33134	01111120011			82 Street	et Address (P.O. Box Number is Not Acceptable)
	1,2 00,101	2.00		}	83	
				1	84 City	FL 85 Zip Code
11. Pursuant office or ragent. La	to the provisions registered agont, im familiar with, a	of Sections 607.0502 a or both, in the State of nd accept the obligation	and 607.1508, Florida Statute Florida. Such change was a ons of, Section 607.0505, Flo	es, the ab authorized orida Stati	ove-named by the corutes.	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Stanature, typed or prin	nled name of registered agont (	and tile if epolicable (NOT)	i Hogistorad	Anoni signatur	ture required when reinstating) DATE
12.		OFFICERS AND		13.	Agont signatur	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD		DECETE	1,1 111	LE	Change Addition
NAME	OBREGON, A	<b>NA</b>		1.2 NA		J. Statings 23 Novinos
STREET ADDRESS	701 SW 27 A	VE., 10TH FLOOR			REET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33	134			Y- \$1 - ZIP	
TITLE	T		DELETE	2.1 TIT		Change Addition
NAME	WEISS, ADE	NA .		2.2 NAI	v1E	
STREET ADDRESS	701 SW 27 A	VE., 10TH FLOOR			REFT ADDRESS	s
CITY-ST-ZIP	MIAMI FL 331	134			Y-ST-ZIP	
TITLE	8		DELETE	3 1 TIT		Change Addition
NAME	WEISS, ALITZ	ZA .		3 2 NA	<b>J</b> IF	
. STREET ADDRESS	701 SW 27 A	VE., 10TH FLOOR	33		IEET ADDRESS	s
CITY-ST-ZIP	MIAMI FL 331			Y-ST-7/P	·	
TITLE		······································	DELETE	4.1 1(1)		Change Addition
NAME				4. 2 NA		
STREET ADDRESS			•		EET ADDRESS	s
CITY-ST-ZIP				•	Y - \$1 - ZIP	
TITLE	····· • • • • • • • • • • • • • • • • •	··	DELETE	5.1 TITI		☐ Change ☐ Addition
NAME				5.2 NA		
STREET ADDRESS					EET ADDRESS	s
CITY-ST-ZIP					Y-ST-ZIP	
TITLE			☐ DELE1E	6.1 T(T)		Change Addition
NAMÈ			_	6.2 NAM		Tourier Land Tourier
STREET ADDRESS				R .	EET ADDRESS	
CITY-ST-ZIP					Y-S1-ZIP	Ĭ
	ov certify that the	information supplied v	ith this filing does not qualif	u for the c	u-orantian r	Polytod in Caption 110 07(9)() Florida Cratidas I furbas applifut to the

I do never by the tire information supplied with this filing doos 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 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.