

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT

1995



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FLORIDA CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 23 AM 10:05

DOCUMENT # V31915

(4)

1. Corporation Name

RUSSIAN PAGING INC.

Principal Place of Business

6577 143RD STREET NORTH
PALM BEACH GARDENS FL 33418-7291

Mailing Address

6577 143RD STREET NORTH
PALM BEACH GARDENS FL 33418-7291

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/24/1992

3a. Date of Last Report

06/13/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

65-0396744

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLACK, ROBERT J
4500 LE JEUNE ROAD
CORAL GABLES FL 33146

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 typed or printed name of registered agent and the filer, if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME CANADAX, JON L
STREET ADDRESS 6577 143RD ST. N.
CITY - ST - ZIP PALM BCH. GARDENS FL 33418

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE VD
NAME BARKPR, TOM
STREET ADDRESS 6577 143RD ST. N.
CITY - ST - ZIP PALM BCH. GARDENS FL 33418

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

☐ Change ☐ Addition

TITLE PD
NAME KLEAGER, GRIGORI A
STREET ADDRESS D. BEDNOGO ST. 24
CITY - ST - ZIP MOSCOW R 12330-8/

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

☐ Change ☐ Addition

TITLE VD
NAME ROZENBLAT, MICHAEL
STREET ADDRESS D. BEDNOGO ST. 24
CITY - ST - ZIP MOSCOW R 12330-8

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

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

Jon L. Canaday
SIGNATURE TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407
6-19-95-775-9310
Date