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PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 314907

(7)

MEDICAL TRANSCRIBERS INC

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Principal Place of Business Mailing Address even e.w. even nature RION S.W. RIST DRIVE							
8100 S.W. 81ST DRIVE Suite 275 Miami Fl 33143		8100 S.W. 81ST DRIVE Suite 275 Miami Fl 33143-6694					
MIN. 1 E 401 10			****		3. Date Incorporated or Qualified 03/17/1967	3a. Date of Last F 03/29/1996	Report
2. Principa: Place of Business		2a. Mailing Address	2a, Mailing Address		4. FE! Number		oplied For
1		26			59-1166593 Not Applicabl		
Suite, Apt i	#, etc	Suite Apt. #. etc.			5. Certificate of Status Desired		Additional equired
2] City & State	3	City & State			6. Election Campaign Financing		
3]		28			Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Countr	y	8. This corporation has liability for in	ntangible tax under s	. 199.032,
4	25	29	30		Florida Statutes	Yes 🗌 No	
g. Name and Address of Curre		nt Registered Agent			10, Name and Address of New Registered Agent		
	J SERVICES, INC.		81	Name			
526 E. PARK AVENUE			82 Street Ad		ddress (P.O. Box Number is Not Acceptable)		
TALL	LAHASSEE FL 32314						
			83	,			
			84	City	Maria	85 Zip	Code
	607.01	00 - 1 002 1000 Final Class	stee the plan		reportion a shorts this statement for the sa	FL 65 2.19	te registerer
office or n	egistered agent, or both, in the State	e of Florida. Such change was	s authorized b	v the corpora	rporation submits this statement for the pation's board of directors. I hereby accep	ot the appointment as	registered
exercised Levi	m familiar with land accept the oblig	rations of Section 607 0505. I	Florida Statute	VC.			
agentra	The same that the the thought the start	gattoric or, because or leading	ional otatot	73,			
					mired when renstation	DATE	
SIGNATURI	Signature, typed or per their area of modulers diag	gent and title diapplicable (N	OTE Registered A		uired when renstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTO	RS IN 12
SIGNATURI	Signature, typed or per their area of modulers diag			gent signature requ			
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Secretary of State

Feb 20 1997 8:00 am