

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

PROFIT CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **370982** (1)  
1. Corporation Name  
**BRYANT ANSWERING SERVICE, INC.**



Principal Place of Business: **10055 SUNSET DR. MIAMI FL 33173**  
Mailing Address: **10055 SUNSET DR. MIAMI FL 33173**

|                                |                     |                     |                     |
|--------------------------------|---------------------|---------------------|---------------------|
| 2. Principal Place of Business |                     | 2a. Mailing Address |                     |
| 21                             | Suite, Apt. #, etc. | 26                  | Suite, Apt. #, etc. |
| 22                             | City & State        | 27                  | City & State        |
| 23                             | Zip                 | 28                  | Country             |
| 24                             | Country             | 29                  | Zip                 |
| 25                             |                     | 30                  |                     |

|   |  |
|---|--|
| 3. Date Incorporated or Qualified<br><b>10/09/1970</b>  | 3a. Date of Last Report<br><b>02/21/1995</b> |
| 4. FUI Number<br><b>59-1306110</b>  | Applied For<br>Not Applicable                |
| 5. Certificate of Status Desired <input type="checkbox"/>   | <b>\$8.75</b> Additional Fee Required        |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>   | <b>\$5.00</b> May Be Added to Fees           |
| 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                      |  |  |  | 10. Name and Address of New Registered Agent |  |          |  |
| <b>BRYANT, MARGARET L.<br/>7341 S.W. 84TH CT.<br/>MIAMI FL 33143</b> |  |  |  | 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 title if applicable (NOTE: Registered Agent signature required when no change in status) (DATE)

| 12. OFFICERS AND DIRECTORS |                    | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |   |
|----------------------------|--------------------|---|---|
| TITLE                      | NAME               | 1.1 TITLE   | 1.2 NAME  |
| TSD                        | BRYANT, MARGARET C | <input type="checkbox"/> Change                       | <input type="checkbox"/> Addition                                 |
|                            | 7341 S W 84TH CT   | 1.3 STREET ADDRESS                                    |   |
|                            | MIAMI, FL 33143    | 1.4 CITY - ST - ZIP                                   |   |
| PD                         | BRYANT, WILLIAM J  | 2.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|                            | 7341 S W 84TH CT   | 2.2 NAME  |   |
|                            | MIAMI, FL 33143    | 2.3 STREET ADDRESS                                    |   |
| VD                         | BRYANT, DIANNE     | 2.4 CITY - ST - ZIP                                   |   |
|                            | 7341 S. W 84 COURT | 3.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|                            | MIAMI FL           | 3.2 NAME  |   |
|                            |                    | 3.3 STREET ADDRESS                                    |   |
| VP                         | BRYANT, JOHN J     | 3.4 CITY - ST - ZIP                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|                            | 7341 SW 84TH COURT | 4.1 TITLE   |   |
|                            | MIAMI FL           | 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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: *Margaret Bryant* 1/16-96 305-271-5929  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Year/Phone #

CR2E034 (12/95)