

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90192 019 ***150.00

DOCUMENT # 580446

1. Corporation Name

TRANSCRIPTIONS LTD. OF FLORIDA, INC.

Principal Place of Business

9700 SOUTH DIXIE HIGHWAY
610
MIAMI FL 33156
US

Mailing Address

9700 SOUTH DIXIE HIGHWAY
SUITE 610
MIAMI FL 33156
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/27/1978

4. FEI Number

59-1846219

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 owes the current year Intangible
Personal Property Tax.

Yes No

2. Principal Place of Business

21 9700 South Dixie Hgwy

2a. Mailing Address

26 5 Greentree Center

Suite, Apt. #, etc.

22 610

Suite, Apt. #, etc.

27 Suite 311

City & State

23 Miami FL

City & State

28 Marlton, NJ

Zip

24 33156

Country

25 USA

Zip

29

Country

30 USA

9. Name and Address of Current Registered Agent

KRIEGER, JEFFREY

9700 SOUTH DIXIE HIGHWAY #610

MIAMI FL 33156

10. Name and Address of New Registered Agent

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME KRIEGER, JEFFREY

STREET ADDRESS 9700 SOUTH DIXIE HIGHWAY #610

CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

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TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☐ Change ☒ Addition

1.2 NAME John A. Donohoe

1.3 STREET ADDRESS 5 Greentree Center, Suite 311

1.4 CITY-ST-ZIP Marlton, NJ 08053

2.1 TITLE Secretary ☐ Change ☒ Addition

2.2 NAME John M. Suender

2.3 STREET ADDRESS 5 Greentree Center, Suite 311

2.4 CITY-ST-ZIP Marlton, NJ 08053

3.1 TITLE Treasurer CFO ☐ Change ☒ Addition

3.2 NAME John R. Emery

3.3 STREET ADDRESS 5 Greentree Center, Suite 311

3.4 CITY-ST-ZIP Marlton, NJ 08053

4.1 TITLE Vice President & Controller ☐ Change ☒ Addition

4.2 NAME Bruce Van Fossen

4.3 STREET ADDRESS 5 Greentree Center Suite 311

4.4 CITY-ST-ZIP Marlton, NJ 08053

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/99

Date

609 596-8877

Daytime Phone #

CR2E034 (11/98)