

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 02, 2002 8:00 am**  
**Secretary of State**

09-02-2002 90049 031 \*\*\*550.00

**DOCUMENT # P01000096335**

1. Entity Name

**SPECIALTY TRANSCRIPTION, INC.**

Principal Place of Business

12181 SW 49TH CT  
 COOPER CITY FL 33330

Mailing Address

12181 SW 49TH CT  
 COOPER CITY FL 33330

2. Principal Place of Business

855 NW 110<sup>th</sup> Terrace  
 Suite, Apt. #, etc.

3. Mailing Address

855 NW 110<sup>th</sup> Terrace  
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State  
 Plantation, FL

Zip  
 33324

Country  
 U.S.

City & State  
 Plantation, FL

Zip  
 33324

Country  
 U.S.

4. FEI Number

65-1143204

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PALMERO, STACI  
 12181 SW 49TH CT  
 COOPER CITY FL 33330

7. Name and Address of New Registered Agent

Name

Palmero, Staci

Street Address (P.O. Box Number is Not Acceptable)

855 NW 110<sup>th</sup> Terrace

City Plantation

FL

Zip Code 33324

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Staci Palmero*  
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

Staci Palmero, President 8/16/02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PALMERO, STACI 12181 SW 49TH CT COOPER CITY FL 33330	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Palmero, Staci 855 NW 110 <sup>th</sup> Terrace Plantation, FL 33324	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. 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 report or supplemental 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 11 of Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Staci Palmero*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/16/02

(954) 475-0101

CR2E034 (4/02)