

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

FILED
Jan 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P15514 (3)

1. Corporation Name
PEOPLES TELEPHONE COMPANY, INC.

Principal Place of Business 2300 NW 89TH PL MIAMI FL 33172 US	Mailing Address 2300 NW 89TH PL MIAMI FL 33172 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/10/1987	4. FEI Number 13-2626435	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

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 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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	D	<input type="checkbox"/> DELETE
NAME	LUND, ROBERT	
STREET ADDRESS	2300 N.W. 89TH PL	
CITY-ST-ZIP	MIAMI FL	
TITLE	CEOD	<input type="checkbox"/> DELETE
NAME	SANDERS, CRAIG E	
STREET ADDRESS	2300 NW 89TH PL	
CITY-ST-ZIP	MIAMI FL	
TITLE	CFO	<input type="checkbox"/> DELETE
NAME	BUMI, BONNIE	
STREET ADDRESS	2300 NW 89TH PLACE	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MACCARONE, JUSTIN S	
STREET ADDRESS	299 PARK AVE., 34TH FL	
CITY-ST-ZIP	NEW YORK NY	
TITLE	D	<input type="checkbox"/> DELETE
NAME	FRANK, JODY	
STREET ADDRESS	666 FIFTH AVE., 13TH FLR	
CITY-ST-ZIP	NEW YORK NY	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DELANEY, CHARLES J	
STREET ADDRESS	299 PARK AVE., 34TH FL	
CITY-ST-ZIP	NEW YORK NY	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	William A. Baum
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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.

SIGNATURE:

William A. Baum REQUIRED

1/9/98

(305) 593-9667

CR2E034 (10/97)



Peoples Telephone Company, Inc.

January 8, 1998

Department Of State
Annual Report Filing Division
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

Enclosed is the 1998 Florida Corporation Annual Report for Peoples Telephone Company (Ein: 13-2626435).

An extra copy of this letter is also enclosed. Please date-stamp that copy and return it in the enclosed self addressed stamped envelope.

If you have any questions, or need further information, please call me at (305) 593-9667 ext. 233.

Sincerely,

A handwritten signature in cursive script, appearing to read "Stephen M. Sisson".

Stephen M. Sisson
Tax Manager



January 8, 1998

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Annual Report Filing Division
P.O. Box 1500
Tallahassee, FL 32302-1500

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