

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000010872

FILED  
Jan 25, 2002 8:00 AM  
Secretary of State

**Entity Name:** EXPERT MEDICAL TRANSCRIPTION, INC.

## Current Principal Place of Business:

10850 SW 113 PL  
STE. 220  
MIAMI, FL 33176 US

## New Principal Place of Business:

## Current Mailing Address:

10850 SW 113 PL  
SUITE 220  
MIAMI, FL 33176 US

## New Mailing Address:

FEI Number: 65-0391980

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHAFER, KENNETH W.  
10852 NORTH KENDALL DRIVE  
SUITE 205  
MIAMI, FL 33176 US

## Name and Address of New Registered Agent:

SCHAFER, KENNETH W.  
5411 S.W. 104TH AVENUE  
MIAMI, FL 33165 US

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.

SIGNATURE:

01/25/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: V ( ) Delete  
Name: DOYLE, CELIA L  
Address: 358 ROSE HILL RD  
City-St-Zip: ASHEVILLE, NC 28803

Title: PST ( ) Delete  
Name: SCHAFER, KENENTH W.  
Address: 10852 NORTH KENDALL DRIVE #205  
City-St-Zip: MIAMI, FL 33176

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change ( ) Addition  
Name: DOYLE, CELIA L  
Address: 1005 RIVER RIDGE DRIVE  
City-St-Zip: ASHEVILLE, NC 28803

Title: PST (X) Change ( ) Addition  
Name: SCHAFER, KENENTH W.  
Address: 5411 S.W. 104TH AVENUE  
City-St-Zip: MIAMI, FL 33165

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH W. SCHAFER

MR.

01/25/2002

Electronic Signature of Signing Officer or Director

Date