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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P93000014146 (3)

COIN-TEL PAYPHONES, INC.

Principal Place	co of Rusinese	Mailing Address		-{	
Principal Place of Business 450 ANSIN BLVD.		280 S PARKWAY			
BLDG. 1 HALLANDALE FL 33009		BLDG. 1			
		GOLDEN BEACH FL 33160		DO NOT WRITE IN THIS SPACE	
		u\$		3. Date Incorporated or Qualified	
8 5				02/17/1993	
	Place of Business	28. Maning Address		4. FEI Number	Applied For
21		26		65-0393918	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	TLETE BLAG. 1	6. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Žip 24	Country 25 US	Zip 3	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
G	OLDSTEIN, MICHAEL D		81 Name		
280 S. PARKWAY DR.			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
GOLDEN BEACH FL 33160-2219			62 Street Addin	ess (P.O. Box Number is Not Acceptable)	
<u> </u>	DEDELL DESCRIPTION OF THE PROPERTY.		83		
			<u> </u>		· -, ,
			B4 City	F	85 Zip Code
11. Pursuant office or a agent. I a SIGNATURE	to the provisions of Sections 607.050 registered agent, or both, in the State arm familiar with, and accept the obligational transfer of register displayed a provided transfer of register displayed a provided transfer of register displayed.			oration submits this statement for the purposion's board of directors. I hereby accept the a	
12.	Signature, typod or printed horse of registers if age OFFICERS AND		Registered Agent's gnature require	ed when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PSD	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	GOLDSTEIN, MICHAEL D	EJ bereie			☐] custide ☐] yaquiqui
_	280 SOUTH PKWY		1.2 NAME		
STREET ADDRESS	GOLDEN BCH FL		1.3 STREET ADDRESS		
CITY-ST-ZIP	VI	DELETE	1.4 CITY - ST - ZIP		Change Addition
	i * •	C OCCCIO			Carande
NAME	GOLDSTEIN, SHERRY L		2.2 NAME		
STREET ADDRESS	280 SOUTH PKWY		2 3 STREET ADDRESS		
CITY-\$T-ZIP	GOLDEN BCH FL		2 4 CITY-S1-ZIP		
TITLE	J	DELETE	3.1 117LE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADORESS		
CITY-ST-ZIP		T1	3.4. C(TY - S1 - ZIP		
TITLE		L] DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME.		
STREET ADDRESS			4.3 STREET ADDRESS		

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 recovery 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 attrictioning with an address.

4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP

5.4 CITY - \$1 - ZIP

61 TITLE

62 NAME

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

MICHAEL D. GOLDSTEIN

4/29/98 305-936-00b

Change

Addition

FILED

May 12 1998 8:00am

Secretary of State

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