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

Mailing Address

SUITE 206

2901 W. BUSCH BLVD.

PROFIT CORPORATION ANNUAL REPORT 1999 ·



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P93000048415**1. Corporation Name

Principal Place of Business 2901 W. BUSCH BLVD.

SUITE 206

THE MESSAGE ON HOLD NETWORK OF AMERICA, INC.

TAMPA FL 33618 TAMPA FL 33618					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qu	alifed		
					07/12/1903			
N f D i	On Maillian Adden						- I I -	-liad Faa
2. Principal Place of Business		2a. Mailing Address			i		1	plied For
	26				59-3193845_		No	t Applicable
. #, etc.	Suite, Apt. #. 6	etc.				. –	\$8.75	Additional
22		27			5. Certifcate of Status Desi	red 📙		
*								~~~
(9	City & State				1	ncing [7]		
• •	28				Trust Fund Contribution		Added t	o Fees
Country	Zip	Co	untry		8. This corporation owes th	e current vear In	tangible	
25	20	20	•		1		[] Yes	□No I
<u> </u>	1 1	30	1		<u> </u>	May Pagister-		
						∠A6⊪r		
DOOO DAMBA			81	Name				
aGS, DAVID M	and the second of the second of	.,	00	Cton at Add-	an (D.O. Boy Number is 11st A	ogostablo)	-	
	化新层燃料 化	17.1.	82	Street Addre	ess (P.U. Box Number is NOT A	cceptable)		ł
	e ,	, .	62			The section was a second	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1 (8) gard 14 91
result /1 I L OCOUL			03			1955年11日4月	被电路	機能報 場 1
•				City	Section 2 Section 2	A SA CONTRACTOR	Proping the	1351 215 +281 *AAA 944 1447
•			64	City		FI	S2 Zip (,oue
1. de	CO7 4500 Florid	. Ctatutas II	abe::-	named	ration authority this statement f	or the purpose =:	E changing its	registered
to the provisions of Sections 607.0502 registered agent, or both, in the State of	and 507.1508, Florida f Florida: Such change	a otatutes, the a e was authorize	auove ad hv i	r-named corpo the corporation	n's board of directors. I hereby	accept the appo	intment as re	registered
am familiar with, and accept the obligation	ons of, Section 607.05	505, Florida Sta	itutes.					,
, ,								
Standure broad or crinted name of registered execut	and title if applicable	(NOTE: Registers	ed Anent	signature required	when reinstation)	DATE		
				graniora roquii 60	- , , , , ,		ND DIRECTO	RS IN 12
			•			O OF FIGURES A		
} '	□ DEI	LE IE 1.1 T	IITLE				∪nange	Addition
WALL, DOUGLAS		1.2 N	NAME					j
· · · · · · · · · · · · · · · · · · ·			STREET	ADORESS				- 1
								-
IAMEA EL 33010				-ZIP				
].		LE 1E 2.1 T	IITLE				∐ Change	☐ Addition
		2.2 N	VAME					}
		228	TREET	ADDRESS	•	•		1
STREET ADDRESS OTY-ST-ZIP OTY-ST-ZIP				i				•
	er grande a grande		CITY-S1	T-ZIP				
Viet margin -	∩ n≠i							I I Addition
		LETE 3.1 T	ITILE	- 1			☐ Change	☐ Addition
松色性色体 1000 mm			TITLE NAME	-			☐ Change	Addition
MARKATA ALIAN ALIAN A		32 N	NAME	ADDDESS			☐ Change	L Addition
Manager (Manager) (Manager	· De la participa de la partic	32 N	NAME	ADDRESS	1970 (A. P. 12 will)	2	☐ Change	Addition
Marie Marie Carlos (Marie Carlos Carl		3.2 N	NAME					Addition
	DEL	32 N 3.3 S 3.4 (NAME STREET				☐ Change	Addition
	100.1991	32 N 33 S 34 C ,ETE 4.1 T	NAME STREET CITY-ST					
	100.1991	32 N 33 S 34 (LETE 4.1 T 4.2 P	NAME STREET CITY-ST TITLE NAME	T-ZIP				
	□ DEL	32 N 33 S 34 (LETE 4.1 T 4.2 P	NAME STREET CITY-ST TITLE NAME					
	□ DEL	32 N 33 S 34.0 .EYE 4.1T 4.21	NAME STREET CITY-ST TITLE NAME	T-ZIP ADDRESS				
	□ DEL	32 N 33 S 34 C LETE 4.1 T 4.2 I 4.3 S 4.4 C	NAME STREET CITY-ST TITLE NAME STREET	T-ZIP ADDRESS				
	☐ DEL	32 N 33 S 34 C LETE 4.1 T 4.2 I 4.3 S 4.4 C LETE 5.1 T	STREET CITY-SI TITLE NAME STREET CITY-ST	T-ZIP ADDRESS			Change	> Addition
	☐ DEL	32 N 33 S 34 C LETE 4.1 T 4.2 I 4.3 S 4.4 C LETE 5.1 T 5.2 N	CITY-ST TITLE NAME STREET CITY-ST TITLE NAME	ADDRESS -ZIP			Change	> Addition
	☐ DEL	32 N 33 S 34 C LETE 4.1 T 4.2 I 4.3 S 4.4 C LETE 5.1 T 5.2 N	CITY-ST TITLE NAME STREET CITY-ST TITLE NAME	T-ZIP ADDRESS			Change	> Addition
	☐ DEL	32 N 33 S 34.0 LETE 4.1 T 4.2 I 4.3 S 4.4 C LETE 5.1 T 5.2 N 5.3 S	CITY-ST TITLE NAME STREET CITY-ST TITLE NAME	I-ZIP ADDRESS -ZIP ADDRESS			Change	> Addition
	☐ DEL	32 N 33 S 34.0 LETE 4.1 T 4.2 I 4.3 S 4.4 C LETE 5.1 T 5.2 N 5.3 S 5.4 C	NAME CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET STREET	I-ZIP ADDRESS -ZIP ADDRESS			Change	Addition
	☐ DEL	32 N 33 S 34.0 4.1 T 4.2 I 4.3 S 4.4 C ETE 5.1 T 5.2 N 5.3 S 5.4 C ETE 6.1 T	NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE STREET CITY-ST TITLE	I-ZIP ADDRESS -ZIP ADDRESS			Change	> Addition
	☐ DEL	32 N 33 S 34.0 4.1T 4.21 4.3 S 4.4 C ETE 5.1 T 5.2 N 5.3 S 5.4 C ETE 6.1 T 6.2 N	NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE VAME STREET CITY-ST TITLE VAME	I-ZIP ADDRESS -ZIP ADDRESS			Change	Addition
	#, etc. Country 25 9. Name and Address of Current GGS, DAVID M MADISON ST IPA FL 33602 to the provisions of Sections 607.0502 registered agent, or both, in the State of the familiar with, and accept the obligations.	#, etc. #, etc. City & State 28 Country Zip 25 9. Name and Address of Current Registered Agent GGS, DAVID M MADISON ST IPA FL 33602 to the provisions of Sections 607.0502 and 607.1508, Floridal Such change and familiar with, and accept the obligations of, Section 607.05 Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS P WALL, DOUGLAS 2901 W. BUSCH BLVD. #206 TAMPA FL 33618	Place of Business 2a. Mailing Address 2b. #, etc. Suite, Apt. #, etc. City & State 28 Country Zip Country Zip Country Zip Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS PWALL, DOUGLAS 29. Mailing Address Suite, Apt. #, etc. 27 Zip Country Zip Signature Agent Country Signature with, and accept the obligations of, Section 607.0505, Florida Statutes, the registered agent, or both, in the State of Florida: Such change was authorize and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the registered agent and title if applicable. OFFICERS AND DIRECTORS 13. P	Place of Business 2a. Mailing Address 2b. Suite, Apt. #, etc. 27 29 29 30 9. Name and Address of Current Registered Agent 31 32 33 34 34 35 36 36 36 36 36 36 36 36 36	#, etc. Suite, Apt. #, etc.	3. Date Incorporated or Qu 07/12/1993	3. Date Incorporated or Qualified 07/12/1993 Place of Business 2a. Mailing Address 26 4. FEI Number 59-3 193845 #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 59-3 193845 #, etc. 27 City & State 6. Election Campaign Financing Trust Fund Contribution 6. Election Campaign Financing Trust Fund Contribution 7. Trust Fund Contribution 7. Trust Fund Contribution 8. This corporation owes the current year In Personal Property Tax. 9. Name and Address of Current Registered Agent 31 Name 6. SaS, DAVID M MADISON ST 82 Street Address (P.O. Box Number is Not Acceptable) PA FL 33602 84 City FL to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose or egistered agent, or both, in the State of Florida: Such change was author above-named corporation's board of directors. I hereby accept the appoint familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS 13, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14, CITY-ST-ZIP 1.1 ITILE 2.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	3. Date Incorporated or Qualifed O7/12/1993 A FEI Number Ap FEI Number

SIGNATURE:

officer or director of the corporation of Block 12 or Block 13 if changed, or of

14. I hereby certify that the information supplied with this filing does not qualify for the expindicated on this annual report or supplemental annual report is true and accurate and

e exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and that my signature shall have the same legal effect as if made under oath; that I am an uto this report as required by Chapter 607, Florida Statutes; and that my name appears in er like empowered.

FILED

Feb 08, 1999 8:00am

Secretary of State

02-08-1999 90035 006 ***150.00