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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Scoretary of State

1996

DIVISION OF CORPORATIONS

DOCUMENT #	P93000074204	(7)
1 Cornoration Name		•

AUDIOTEL, INC.

	LL, 1110.				··			
Principal Place of	of Business	Mailing Address						
P.O. BOX 575 DEERFIELD BE	ACH FL 33443	P.O. BOX 575 Deerfield beach f	FL 33443					
						3. Date incorporated or Qualified 3a. 10/20/1993	Date of Last Re 05/01/199	•
2. Principal Plac	ce of Business	2a. Mailing Address				4. FEI Number	F	Applied For
21		26				NOT APPLICABLE		Not Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	,	May Be
Zip 24	Country 25	Zip 29	Сои	ntry		8. This corporation has liability for intangil Florida Statutes Yes \(\sigma\) Yes	ble tax under s lo	199.032,
	9. Name and Address of Curre					10. Name and Address of New Registe	red Agent	
				81	Name			
	RICHARD A		ļ	82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	48TH AVENUE LD BEACH FL 33442			83		A. L.	***	
				84	City		85 Zi	p Code
11 Pureuant to	the ryovisions of Sections 607 050	2 and 607 1508. Florida Stat	lutes, the abo	ve-n	named coroor	ation submits this statement for the purpose of	of changing its r	registered office
or registere	id agent, or both, in the State of Flor i, and accept the obligations of, Sec	ida. Soch change was authö	orized by the c	orpo	oration's boar	d of directors. I hereby accept the appointme	nt as registered	l agent. I am
SIGNATURE	i, and accept the obligations o , occ	(CA COLLEGE, FRANCE COLLA						
	Signature, typed or printed name of regelered age:		NOTE Regional	Δ _{ε,0}	d signature recorrect		AND DIDECTO	VDC (N. 10
12.		ND DIRECTORS	13.		·	ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE NAME	PVTS COLLINS, RICHARD A	Попп	12 M					
NAME STREET ADDRESS	487 N.W. 48TH AVENUE				ADDRESS			
	DEERFIELD BEACH FL 3344							
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certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signalure shall be same legal effect as if made under oath, that I am an officer or director of the conjunction 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DICH ARD COLLINS

4-29-96 (954) 480-8811

CR2E034 (12/95)