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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P93000074204**1. Corporation Name

AUDIOTEL. INC.

FILED Mar 09, 1999 8:00 am Secretary of State

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Principal Place of Business Mailing Address													
P.O. 80X 575 P.O. 80X 575													
DEERFIELD BE	ACH FL 33443	DEERFIELD	DEERFIELD BEACH FL 33443				DO NOT WRITE IN THIS SPACE						
							3 Date In	ncorporated			O O AOL		\neg
								0/1993	, -,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
2. Principal P	lace of Business	2a. Mailing	2a. Mailing Address				4. FEI Number			$ \Box$ \Box	Applied For		
21		26	26				NOT APPLICABLE				Not Applicabl	e	
Suite, Apt.	#, etc.	Suite,	Suite, Apt. #, etc.				5 Certifo	ate of Statu	s Desired			5 Additional	-
22		27					J. Ositile				- Fee	Required	_
City & Stat	e	City &	State				1	n Campaig		g 🗆		0 May Be	1
23		28					Trust F	und Contri	bution		Adde	ed to Fees	4
Zip	Country	Zip	_	Cour	itry			•		urrent year l			ļ
24	25	29		30				nal Property			Yes	□No	-
	9. Name and Address of Curr	ent Registered A	gent		81 N	ame	10. Name	and Addre	ss or Nev	Registere	a Agent		
COL	LINS, RICHARD A			Ì		uno					·		_
	O W PALMETTO PARK RD				82 S	treet Addre	ess (P.O. Box Number is Not Acceptable)						-
	TE 4-125			}	83								
	A RATON FL 33433				33	_							
					84 C	ity					85 Z	ip Code	
	to the provisions of Sections 607.0	500 - 1007 4505	5 51 - Ot - t- t- t-				votion submi	ita thia atata	mont for the	o purpose	ef changing	ite registered	\dashv
office or r	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the obliging	te of Florida. Such	n change was aut	thorized	by the	corporation	n's board of	directors. I	hereby acc	cept the app	ointment as	registered	
SIGNATURE	Signature, typed or printed name of registered a	nent and title if applicable	e (NOTE: F	Registered /	Agent sign	nature required	when reinstating)			DATE			
12.		AND DIRECTORS		13.					IGES TO C	OFFICERS A	AND DIREC	TORS IN 12	
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GILT-ST-ZIP	1												

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, with all other like empowered.

SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR