FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

Maling Address

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

1996

Principal Place of Business.

DOCUMENT # P93000074959 (6)

CENTRAL TALK MANAGEMENT, INC.

APPROVED AND FILED

96 FEB -2 PM 4: 29

SECRETARY OF STATE TALLAHASSEE, FLORIDA



2455 E SUNRISE BLVD #1102 FT LAUDERDALE FL 33305 US	2455 E SUNRISE BLVD #1102 FY LAUDERDALE FL 33305 US		3. Date Incorporated or Qualified 10/21/1993	3a. Date of Last I	•			
2. Principal Place of Busines	22	a. Mailing Address			4. FEI Number		Applied For	
21	26				65-0445055	<u> </u>	Not Applicable	
State: Apr. #1, etc. [22]	27	Snile, Apt. #. etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State 23		Oty & State			Election Campaign Financing Trust Fund Contribution			
	Country 21p Country 25 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes				
9, Name a	nd Address of Current Regi	stered Agent			10. Name and Address of New R	agistered Agent		
·			81	Name				
IMOYLE, BERNARD T ONE FINANCIAL PLAZA			82	Street Addi	ress (P.O. Box Number is Not Acceptabl	e)		
suite 1602 Ft lauderdale fl	. 33394		83 84	City		85 Z	no Code	
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OF TO SPECIAL OF TR	oth, in the State of Florida. Suction 607	zi change was aumor	∉ed by the coα	ramed corpor oration's boar	ration submits this statement for the purp rd of directors. I hereby accept the appo	xose of changing its intrient as registere	registered office dagent lam	
SIGNATURE System Operating	personal ar of regular or fagurational stein	ao.die	∛ dE: Flogratered Age	A signaturo nagrane	st west trate-latival	DATE		
12.	OFFICERS AND DIRE		13.		ADDITIONS/CHANGES TO OFFI		ORS IN 12	
THE D		[] DELETE	1 1 1 TLE			Change	Addition	
MARY LINDSEY,	THOMAS		1.2 NAME					
5 8 11 40 (Face 3001 NE	19TH ST		1.3 STREET ADDRESS 1.4 CITY - ST- ZIP					
Otristize FT LAUDI	ERDALE FL 33305							
111.6		DELETE	2.1300.6		Change Addition			
N/M-			2.2 NAME	Ì			_	
SHIFT MIGHTSS			2.3 STREE	ADORESS				
C15-50-72			2.4 Cily - 1	1 - 21F				
R*uF		DELFTE	3 1 TOLE			Change	Add tion	
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N/M			4.2 NAME		20000172 -02/29/96011	វិសិស៊ី35		
STRUIT Albertance			4.3 STREET	ADDRESS	-04/49/96011	UUU28		
Official Zer			4.4 CITY - \$1 - 7IP		***200.00			
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100		[] DELETE	& 1 TITLE			☐ Change	Addition	
Nast			€ 2 NAME	Ì		~ A	166	
STREET ADDIESTS			€3.518€13	ADDRESS		() \(\) (0	$V_{\mathcal{A}}$	
(at y - 5) - Zir			€ 4 € (TY-5			16-7	' \	
	a information supplied with this	a filing is voluntarily fur	nished and doe	s not qualify for	or the exemption stated in Section 119.0	07(3)(k), Florida Statu	ites. I further	

14.1 On the Leg desting that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 1.19.07(3)(k). Florida Statutes. I further coldly that the information more after on this armost report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under coldly that I am an other in the cold of the corporation or the receiver or trigitise empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Book. 12 or Book. 13 if changed, or on apartition an address.

SIGNATURE:

INATURE AND TYPER OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/96

(954) 568-3205