

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000072910 (0)

1. Corporation Name:

WALK-IN PHONE CENTERS, INC.

APPROVED
AND
FILED

95 APR -7 AM 4:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1975 EAST SUNRISE BLVD. STE. 711
FORT LAUDERDALE FL 33304

Mailing Address

1975 EAST SUNRISE BLVD. STE. 711
FORT LAUDERDALE FL 33304

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

09/29/1994

3a. Date of Last Report

Initial Report

4. FEI Number

65-0540454

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

MURDOCH, ROBERT E ESQ.
790 EAST BROWARD BLVD. STE. 400
FORT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of person appointed as registered agent and fee is applicable)

(Signature of Registered Agent or person named after him/her)

Date

12. OFFICERS AND DIRECTORS

1. TITLE: D
2. NAME: WAY, DARRELL
3. STREET ADDRESS: 1975 EAST SUNRISE BLVD. STE. 711
4. CITY, ST, ZIP: FORT LAUDERDALE FL 33304

1. TITLE: D
2. NAME: BREWSTER, DANIEL
3. STREET ADDRESS: 1975 EAST SUNRISE BLVD. STE. 711
4. CITY, ST, ZIP: FORT LAUDERDALE FL 33304

1. TITLE: D
2. NAME: CHAVIANO, FRANKIE
3. STREET ADDRESS: 1975 EAST SUNRISE BLVD. STE. 711
4. CITY, ST, ZIP: FORT LAUDERDALE FL 33304

1. TITLE: D
2. NAME: CHAVIANO, FRANKIE
3. STREET ADDRESS: 1975 EAST SUNRISE BLVD. STE. 711
4. CITY, ST, ZIP: FORT LAUDERDALE FL 33304

1. TITLE: D
2. NAME: CHAVIANO, FRANKIE
3. STREET ADDRESS: 1975 EAST SUNRISE BLVD. STE. 711
4. CITY, ST, ZIP: FORT LAUDERDALE FL 33304

1. TITLE: D
2. NAME: CHAVIANO, FRANKIE
3. STREET ADDRESS: 1975 EAST SUNRISE BLVD. STE. 711
4. CITY, ST, ZIP: FORT LAUDERDALE FL 33304

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: ☐ Change ☐ Addition

1.2 NAME: ☐ Change ☐ Addition

1.3 STREET ADDRESS: ☐ Change ☐ Addition

1.4 CITY, ST, ZIP: ☐ Change ☐ Addition

2.1 TITLE: ☐ Change ☐ Addition

2.2 NAME: ☐ Change ☐ Addition

2.3 STREET ADDRESS: ☐ Change ☐ Addition

2.4 CITY, ST, ZIP: ☐ Change ☐ Addition

3.1 TITLE: ☐ Change ☐ Addition

3.2 NAME: ☐ Change ☐ Addition

3.3 STREET ADDRESS: ☐ Change ☐ Addition

3.4 CITY, ST, ZIP: ☐ Change ☐ Addition

4.1 TITLE: ☐ Change ☐ Addition

4.2 NAME: ☐ Change ☐ Addition

4.3 STREET ADDRESS: ☐ Change ☐ Addition

4.4 CITY, ST, ZIP: ☐ Change ☐ Addition

5.1 TITLE: ☐ Change ☐ Addition

5.2 NAME: ☐ Change ☐ Addition

5.3 STREET ADDRESS: ☐ Change ☐ Addition

5.4 CITY, ST, ZIP: ☐ Change ☐ Addition

6.1 TITLE: ☐ Change ☐ Addition

6.2 NAME: ☐ Change ☐ Addition

6.3 STREET ADDRESS: ☐ Change ☐ Addition

6.4 CITY, ST, ZIP: ☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032, Florida Statutes. I further certify that the information included 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 on Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

Daniel L. Brewster
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANIEL L. BREWSTER 25/95 305 961-9353
TAXPAYER'S NO.