

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000072910 (0)

1. Corporation Name

WALK-IN PHONE CENTERS, INC.



Principal Place of Business

Mailing Address

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

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

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Zip

Country

Country

24

25

29

30

9. Name and Address of Current Registered Agent

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

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 607.001 and 607.15(2), 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 607.005, Florida Statutes.

SIGNATURE

Daniel L. Brewster DANIEL L. BREWSTER PRESIDENT 4/11/96

12.

OFFICERS AND DIRECTORS

TITLE

D

WAY, DARRELL

1975 EAST SUNRISE BLVD. STE. 711

FORT LAUDERDALE FL 33304

TITLE

D

BREWSTER, DANIEL

1975 EAST SUNRISE BLVD. STE. 711

FORT LAUDERDALE FL 33304

TITLE

D

CHAVIANO, FRANKIE

1975 EAST SUNRISE BLVD. STE. 711

FORT LAUDERDALE FL 33304

TITLE

D

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

D

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

D

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

D

NAME

STREET ADDRESS

CITY, ST, ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption statement in Section 119.07(3)(k), 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. I am an officer or director of the corporation or the secretary or authorized officer of the corporation as required by Chapter 607, Florida Statutes and that my name appears in Book 12 or Book 13 if changed, or in an affidavit with an address.

SIGNATURE:

Daniel L. Brewster DANIEL BREWSTER

9544671363

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)