

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

1995

DOCUMENT # P94000087799 (0)

MEDSCRIPT TRANSCRIPTION SERVICE, INC.

1463 PALOMINO WAY
OVIEDO FL 32765

P O BOX 1944
OVIEDO FL 32765-1944

12/05/1994

\$8.75 Additional
Filing Fee

\$5.00 May 1st
Applicable Fee

9 Name and Address of Current Registered Agent

BITTERMAN, LISA
1463 PALOMINO WAY
OVIEDO FL 32765

10 Name and Address of New Registered Agent

FL 85

8
LISA BITTERMAN
1463 PALOMINO WAY
OVIEDO FL 32765

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REMITTED BY MAY 1

SIGNATURE:

SIGNATURE AND EXPIRATION DATE OF THE SIGNATURE OF THE REGISTERED AGENT