DOCUMENT # P95000044306

1. Entity Name

TELEPHONE ON HOLD COMMERCIALS, INC.

(R)

FILED

02 OCT 28 AM 11:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
6043 KIMBERLY BLVD. SUITE U N. LAUDERDALE FL 33068	6043 KIMBERLY BLVD. SUITE U N. LAUDERDALE FL 33068

2. Principal Place of Business	3. Mailing Address
6047 Kimberly BLVD	6047 Kimberly BLVD
Suite, Apt. #, etc. SUITE Q	Suite, Apt. #, etc. SUITE Q
City & State N. LauderDale	City & State N. LauderDale
Zip 33068 Country USA	Zip 33068 Country USA

4. FEI Number 65-0587998 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD KING, DIANE 3842 NW 62ND ST COCONUT CREEK FL 33073	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD KING, DIANE 3842 NW 62ND STREET COCONUT CREEK FL 33073	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLARK, CHRISTINE 3842 NW 62ND STREET COCONUT CREEK FL 33073	☐ Delete	000008604860 10/28/02--01021--011 **400.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LIGHTMAN, RUTH 3842 NW 62ND STREET COCONUT CREEK FL 33073	☐ Delete	09-18-02 90051 040	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	$150.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (9/01)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [illegible] REQ Diane King 9/11/2002 954 956 9355

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #