SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # P95000058591

METRO DADE COURT REPORTERS, INC.

Principal Place of Business

Mailing Address

FILED Jul 20, 1999 8:00 am Secretary of State

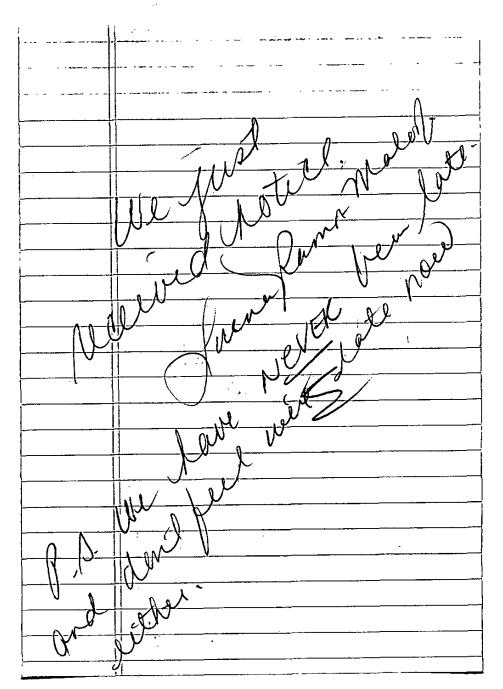
07-20-1999 90001 044 ***150.00



19 W. FLAGLER ST. 19 W. FLAGLER ST. SUITE 803 SUITE 803 MIAMI FL 33130 MIAMI FL 33130				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
					07/28/1995		
2. Principal Place of Business 21 13020 NW 9 Lane 26 POBOX 7			201	, 23	4. FEI Number 65-0596819	Applied For Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	te	City & State			6. Election Campaign Financing	\$5.00 May Be	
23 MIG	mi PL 33182	28 MIAMI.	<u> </u>		Trust Fund Contribution	Added to Fees	
Zip 32	SISA 25 USA	Zip 29 33 172 3	Country	SA	This corporation owes the curre Intangible Personal Property.	Yes No	
	9. Name and Address of Current	Registered Agent	81	Nama	10. Name and Address of New R	egistered Agent	
RAM	OS-MALOOF, LORENA		°'	Name			
19 W. FLAGLER ST.				82 Street Address (P.O. Box Number is Not Acceptable)			
STE 803				83			
MAIM	/II FL 33130					05 75 O-d-	
			84	City M_[Ami	FL 85 Zip Code 2	
office or	t to the provisions of sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligate	of Florida. Such change was aut	horized b	-named co the corpo	rporation submits this statement for the puration's board of directors. I hereby accept	rpose of changing its registered the appointment as registered	
SIGNATURE						DATE	
40	Signature, typed or printed name of registered agent OFFICERS AND		: Registered	Agent signature	required when reinstating) ADDITIONS/CHANGES TO GET	FICERS AND DIRECTORS IN 12	
12.	PSVT		1.1 TITLE	1	ADDITIONS/CITANGES TO OFF	Change Addition	
NAME	RAMOS-MALOOF, LORENA	☐ DELETE	1.2 NAME			Containe	
STREET ADDRESS	19 W FLAGLER ST #803			T ADDRESS	13020 NW 91	ane	
CITY-ST-ZIP	MIAMI FL 33130		1.4 CITY-S		miami A 3	318 5	
TITLE		DELETE	2.1 TITLE	+		- Change - Addition	
- NAME			2 2 NAME				
STREET ADDRESS			2.3 STREE	TADDRESS			
CITY-ST-ZIP			2.4 CITY-9	T-ZIP			
TITLE		DELETE	3.1 TITLE			Change Addition	
NAME	İ		3.2 NAME				
STREET ADDRESS			3.3 STREE	TADDRESS			
CITY-ST-ZIP			3.4 CITY-S	T-ZIP			
TITLE		. DELETE	4.1 TITLE			Change Addition	
NAME			4.2 NAME				
STREET ADDRESS		a sua	4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		DELETE	5.1 TITLE			, Change L Addition	
NAME			5.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP		para a	5.4 CITY-S	T-ZIP		 _	
TITLE		DELETE :	6.1 TITLE	-		Change Addition	
NAME	1		6.2 NAME				
STREET ADDRESS	l t		6.3 STREE	TADDRESS			
CITY-ST-ZIP	i		6.4 CITY-S	T-71P			
14 Iboroby o	<u> </u>				section 119.07(3)(i), Florida Statutes. I furt	1	

SIGNATURE:

CKZE034 (5/99)



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