**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000095320

1. Corporation Name

TAYL DADIO DISPATCH SERVICES INC

## FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90019 019 \*\*\*150.00

FAAFITA	DIO DISPATON SERVICES, I	110.							
Principal Place	e of Business	Mailing Address			-	1	{8487 BIJ	11419 11	#11 BE11 1981
140 N.W. 8TH AVENUE 140 N.W. 8TH AVENUE									
MIAMI FL 33128 MIAMI FL 33128						DO NOT INDITE IN THE			
						DO NOT WRITE IN THIS	SPACE		
					•	3. Date Incorporated or Qualifed 11/04/1997			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Appl	ied For
21		26				65-0797212	Not Applicable		
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				\$8.75 Additional			
	سيقامت يبلون المسوردي ويولوا لاويول	27				5. Certificate of Status Desired Fee Required			
City & Stat	<del> </del>	City & State				6. Election Campaign Financing S5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip Country				8. This corporation owes the current year In	tangible	_	_
24	25	29	30			Personal Property Tax.	Yes		□No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	Agent		
^~	LAMAN MARO		1	B1	Name				
	LLMAN, MARC		1	B2	Street Addres	ss (P.O. Box Number is Not Acceptable)			
	N.W. 8TH AVENUE		L						
MIAN	MI FL 33128		[8	83					ł
			1	B4	City	FI	85	Zip Co	ode
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Floi	nda Statut	es.	signature required v	's board of directors. I hereby accept the appointment of the property of the			
12.	OFFICERS AND		13.		<u> </u>	ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTOR	RS IN 12
TITLE	PD	☐ DELETÉ	1.1 TITU	E			☐ Cha	nge	Addition
NAME	SPELLMAN, MARC		1.2 NAME						
STREET ADDRESS	COOR CAR ARC DE LIBIT A		1,3 STR	1.3 STREET ADDRESS					{
CITY-ST-ZIP	191119 51 66456		1.4 CITY	1.4 CITY-ST-ZIP					}
TITLE				2.1 TITLE			Cha	nge	☐ Addition
NAME	·T		2.2 NAM	2.2 NAME					
STREET ADDRESS	FORE NAME OFFICE AND ADDRESS A		2.3 STR	2.3 STREET ADORESS					
CITY-ST-ZIP	MIAMI FL 33126		2. 4 CIT		1				
TITLE	STD	☐ DELETE	3.1 TITL		_		· Cha	nge	☐ Addition
NAME	SPELLMAN, IRWIN		3.2 NAM	Æ.	]	_		<b>.</b> .	
STREET ADDRESS	1825 S.W. 82ND COURT	2 <sup>*</sup> 2	3.3 STR	EET A	ADORESS			•	
CITY-ST-ZIP	MIAMI FL 33155		3.4. CIT						
TITLE		☐ DELETE	4.1 TFTL				Cha	nge	Addition
NAME			4. 2 NA	ME					
STREET ADDRESS			1		ADDRESS				ļ
CITY-ST-ZIP			4.4 CITY						}
TITLE		☐ DELETE	5.1 TITL				☐ Cha	nge	Addition
NAME			5.2 NAM						ļ
STREET ADDRESS	,		5.3 STR	EET	ADDRESS	•			Ì
CITY-ST-ZIP			5.4 CITY	/-ST-	ZIP				
TITLE		☐ DELETE	6.1 TITL		<del></del>		☐ Cha	nge	☐ Addition
NAME	i								1
	(		6.2 NAW	Æ					ļ

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: