SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #
1. Corporation Name

P97000099919 (7)

CJE TRANSCRIPTIONS, INC.

**FILED** Jul 27 1998 8:00am Secretary of State



Principal Plac	ce of <b>Bus</b> iness	Mailing Address			r anditibet ann serift sonar dettit mana belta natal serif serif serif serif serif serif serif
7880 N. UNIVERSITY DR., #201		7880 N. UNIVERSITY DR., #201			
TAMARAC FL 33321		TAMARAC FL 33321			DO NOT WRITE IN THIS SPACE
[					3. Date Incorporated or Qualified
					11/21/1997
2. Principal F	Place of Business	2a. Mailing Address 5 2	205	Alicalet D	Applied For
21 5270	Place of Business S. N. Colet Drive Berlin, W. 53151	26 New Berlin,	WI 53	3151	65-081-1755   Not Applicable
Suite, Apt.	#, eto.	Suite, Apt. #, etc.			\$9.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & Stat	28 New Berli	41 (		6. Election Campaign Financing \$5.00 May Be	
23 NEW	Berlin, WI	18 NEW DECIN	$n_i \omega$	<u></u>	Trust Fund Contribution Added to Fees
ZP2 16	Country	Zip (r)	Countr		8. This corporation owes or has paid the current year intangible
24 5 5 1 5	) l 25 Waukesha	29 53151	30 WA	uKesha	Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  81 Name					
	ns, <b>Ca</b> thy		8	Name	
7880 N. UNIVERSITY DR., #201			83	82 Street Address (P.O. Box Number is Not Acceptable)	
ļ tam	ARAÇ FL 33321				
			8:	<b>'</b>	
ì			84	City	85 Zip Code
				<u> </u>	<b> </b>
11. Pursuant to the provisions of sections 607.0502 and 607.1508. 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 607.0505, Florida Statutes.					
agent. I am Ignitifar with, and accounts obligations of, Section 607,0505, Florida Statutes.					
SIGNATURE ( 23 1/4 ( 1/13 178 ) 1 1 1 3 1 7 8					
So where, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12.	D OFFICERS AND		13. 1,1 TITLE	<del></del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	EVANS, CATHY	DELETE			Change Addition
)	7880 N. UNIVERSITY DR., #201		1.2 NAME	,	
STREET ADDRESS	TAMARAC FL 33321		i i	TADORESS	
CITY-ST-ZIP TITLE	INMANAC FE 33321	[] <sub>05:575</sub>	1.4 CITY-5 2.1 TITLE	11-212	
NAME	) occin		2.2 NAME	1	Change Addition
STREET ADDRESS				T ADDRESS	
ĺ				į.	
CITY-ST-ZIP TITLE		DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME	1	□ DELETE	3.2 NAME	}	Li Change Li Addikon
STREET ADDRESS				TADDRESS	
CITY-ST-ZIP			3.4 CITY-5	į,	
TITLE		DELETE	4.1 TITLE		Change Addition
NAME	}	L_J OCLL IL	4.2 NAME	ļ	L Origingo L Avoidon
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP			4.4 CITY-5	-	
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE	TADDRESS	
CITY-ST-ZIP			5.4 CITY-S		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME	)		6.2 NAME		500002602415 LAddition   -07/30/9301022007
STREET ADDRESS			6.3 STREE	T ADDRESS	-07/30/9801022007 <b>/2</b> [
CITY-ST-ZIP			6.4 CITY-S	ļ	***165.00
	<del></del>		_		

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 frustee 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 area that me address.

7/13/98

414-427-8659

July 13, 1998

Annual Report Filings
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

To Whom it May Concern:

Enclosed is check for filing fee in the amount of \$165.00. This was the first notice received by you regarding the filing fee. I was advised by my accountant that if he received the first notice, he would have mailed it. However, if it was received by the post office, they did not forward it to my new address. I did not receive first notice. I was advised by my accountant to send the original filing fee of \$165.00 since the first notice was never received.

Please contact me if there are any questions. Thank you for your assistance.

Cathy Evans

5220 S. Nicolet Drive New Berlin, WI 53151

414-427-8659