

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).

FILED  
Aug 26 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000106060 (1)  
1. Corporation Name

INTERNATIONAL GUILD OF VERBATIM REPORTERS, INC.



Principal Place of Business 3762 NE 209TH TERRACE AVENTURA FL 33180	Mailing Address SUITE 3400-ONE BISCAYNE TOWER TWO SOUTH BISCAYNE BLVD MIAMI FL 33131-1897
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/17/1997	
21		26		4. FEI Number 65-0834325	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For Not Applicable	
22		27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23		28		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24	Zip	25	Country	29	Zip
24		25		29	

9. Name and Address of Current Registered Agent

VALDES-FAULI CORPORATE SERVICES, INC.  
SUITE 3400-ONE BISCAYNE TOWER  
TWO SOUTH BISCAYNE BLVD  
MIAMI FL 33131-1897

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CZERENDA, RANDALL A	
STREET ADDRESS	3762 NE 209TH TERRACE	
CITY-ST-ZIP	AVENTURA FL 33180	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	GLASSMAN, DANIEL	
STREET ADDRESS	207 PARTRIDGE LANDING	
CITY-ST-ZIP	GLASTONBURY CT 06033	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	GARAPATI, PRASAD V.S.S.	
STREET ADDRESS	DAMAYANDU CHAMERS 1ST FLOOR RITZ HOTEL RD	
CITY-ST-ZIP	ADARSH NAGAR HYDERABAD INDIA 500 -063	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CZERENDA, A. JUDITH	
STREET ADDRESS	3762 NE 209TH TERRACE	
CITY-ST-ZIP	AVENTURA FL 33180	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MEDICI, WAGNER	
STREET ADDRESS	AVENIDA PAULISTA 1471 SALAS 1 412/1 415	
CITY-ST-ZIP	ANDARA14 SAOPAULO SPCEPBRASIL 01311-927	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BESS, THOMAS	
STREET ADDRESS	99 BATTERY PLACE APT 18E	
CITY-ST-ZIP	NEW YORK NY 10280	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D/P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Czerenda, Randall A.	
13 STREET ADDRESS	3762 N.E. 209th Terrace	
14 CITY-ST-ZIP	Aventura, FL 33180	
21 TITLE	<del>D/P</del>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	<del>Glassman, Daniel</del>	
23 STREET ADDRESS	<del>207 Partridge Landing</del>	
24 CITY-ST-ZIP	<del>GLASTONBURY, CT 06033</del>	
31 TITLE	D/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	Garapati, Prasad V.S.S.	
33 STREET ADDRESS	Damayandu Chamers 1st Fl. Ritz Hotel Rd.	
34 CITY-ST-ZIP	Adarsh Nagar Hyderabad India 500 - 063	
41 TITLE	D/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	Czerenda, A. Judith	
43 STREET ADDRESS	3762 N.E. 209th Terrace	
44 CITY-ST-ZIP	Aventura, FL 33180	
51 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	Wenclawski, John	
53 STREET ADDRESS	1500 Bishop Court	
54 CITY-ST-ZIP	Mt. Prospect, Illinois 60056	
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	200002625762	
63 STREET ADDRESS	-08/26/98--01083--023	
64 CITY-ST-ZIP	***150.00	

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.

SIGNATURE:  Randall A.

30 July 1998 305-937-6256

CR2E034 (5/98)



GUNSTER, YOAKLEY, VALDES-FAULI & STEWART, P.A.  
ATTORNEYS AT LAW

WRITER'S DIRECT DIAL NUMBER: 305-376-6023  
WRITER'S E-MAIL ADDRESS: [abuttari@gunster.com](mailto:abuttari@gunster.com)

August 17, 1998

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: **INTERNATIONAL GUILD OF VERBATIM REPORTERS, INC.**

Dear Sir/Madam:

Enclosed, for filing, is the 1998 Corporate Annual Report for the above referenced corporation. Pursuant to conversations with your office, we are also enclosing a check for \$150.00 for the original filing fee as the original Annual Report, which was sent out in January of this year, was never received.

Should you have any questions regarding the foregoing, please do not hesitate to contact the undersigned.

Sincerely,

Astrid Buttari  
Corporate Legal Assistant

AB/ms  
Encs.

cc: Maria Elena Prio, Esq.