FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V57517 (7)

1. Corporation Name

PAYPHONE CONSULTANTS, INC.

Principal Place of Business
1111 ISLAND SHORES DRIVE
WEST PALM BEACH FL 33413

Mailing Address
1111 ISLAND SHORES DRIVE
WEST PALM BEACH FL 33413

3. Date Incorporated or Qualified: 08/14/1992
3a. Date of Last Report: 01/24/1995

2. Principal Place of Business
21 6436 NW 53rd Street
Suite, Apt #, etc.
22
City & State
23 Lauderhill Florida
Zip 24 33319 Country 25

2a. Mailing Address
26 6436 NW 53rd Street
Suite, Apt #, etc.
27
City & State
28 Lauderhill Florida
Zip 29 33319 Country 30

4. FEI Number: 65-0353325 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. XX Yes ☐ No

9. Name and Address of Current Registered Agent

BURKE, ANNA MAE WALSH
1750 E SUNRISE BLVD
3RD FLOOR
FT LAUDERDALE FL 33304

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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) Date

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	MURRAY, JOHN J., III	
STREET ADDRESS	1111 ISLAND SHORES DRIVE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
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TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☒ Change ☐ Addition
1.2 NAME	Murray, John J. III	
1.3 STREET ADDRESS	6436 NW 53rd Street	
1.4 CITY-ST-ZIP	Lauderhill, Florida 33319	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: John J Murray III JOHN J MURRAY III 2-6-96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #