

960175-TC  
BH

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

1. LEGAL NAME OF THE APPLICANT  
LAWRENCE FOOD MARKET INC

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS  
LAWRENCE FOOD MARKET INC

3. ADDRESS OF THE APPLICANT(S)  
STREET 124 ALPINE ROAD  
CITY WEST PALM BEACH  
STATE & ZIP FLORIDA 33405



4. TYPE OF ORGANIZATION (CHECK ONE)  
A. INDIVIDUAL DOING BUSINESS UNDER HIS/HER:  
OWN NAME.

DOCUMENTATION: No other documentation needed.

B. PARTNERSHIP: [ ]

DOCUMENTATION: Attach a copy of the partnership agreement, and a list with the name and address of all partners.

C. CORPORATION:

DOCUMENTATION: Attach proof that articles of incorporation have been filed with the Florida Secretary of State's Office. If incorporated outside of Florida, attach proof from the Florida Secretary of State that applicant has authority to operate in Florida and provide name and address of Florida Registered Agent.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

D. DOING BUSINESS UNDER A FICTITIOUS NAME: [ ]

DOCUMENTATION: Attach proof that fictitious name has been registered with the Florida Secretary of States Office.

- ACK \_\_\_\_\_
- ATM \_\_\_\_\_
- APP \_\_\_\_\_
- CAF \_\_\_\_\_
- CMU \_\_\_\_\_
- CTR \_\_\_\_\_
- EAG \_\_\_\_\_
- LEG \_\_\_\_\_
- LIN \_\_\_\_\_
- OPC \_\_\_\_\_
- RCH \_\_\_\_\_
- SEC 1
- WAS \_\_\_\_\_
- OTH None

FORM PSC/CMU 32 (83-93) PAGE 2 OF 5  
REQUIRED BY COMMISSION RULE NO. 25-24.511

RECEIVED  
MAR 20 8 43 AM '96  
ADMINISTRATION  
MAIL ROOM

DOCUMENT NUMBER-DATE  
**03297 MAR 20 96**  
FPSC-RECORDS/REPORTING

5. PROVIDE NAME, TITLE, AND TELEPHONE NUMBER OF THE INDIVIDUAL WHO IS RESPONSIBLE FOR COMMISSION CONTACTS:

NAME: ELIE JOUNI  
TITLE: PRESIDENT  
PHONE: (407) 588-7418

6. HAS APPLICANT OR ANY SUBSIDIARY, PARTNER, OFFICER, DIRECTOR, ETC., OR IN THE CASE OF A CLOSELY HELD CORPORATION ANY SHAREHOLDER OF THE APPLICANT EVER BEEN GRANTED OR DENIED A PAY TELEPHONE CERTIFICATE IN THE STATE OF FLORIDA? THIS INCLUDES ACTIVE AND CANCELLED PAY TELEPHONE CERTIFICATES.

NO

7. IF THE ANSWER TO QUESTION 6 IS YES, PLEASE EXPLAIN AND LIST THE CERTIFICATE HOLDER AND CERTIFICATE NUMBER.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. LIST THE STATES IN WHICH THE APPLICANT:

A. IS CURRENTLY PROVIDING PAY TELEPHONE SERVICE

\_\_\_\_\_

B. HAS APPLICATIONS PENDING TO BE CERTIFICATED AS A PAY TELEPHONE PROVIDER.

FLORIDA

C. HAS BEEN DENIED AUTHORITY TO OPERATE AS A PAY TELEPHONE PROVIDER. EXPLAIN CIRCUMSTANCES.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. PLEASE CHECK THE SERVICES THAT WILL BE PROVIDED:

- LOCAL
- LONG DISTANCE
- COIN
- CALLING CARD
- CREDIT CARD
- OTHER, DESCRIBE

[  
✓  
✓  
✓  
✓  
✓  
]

10. PROPOSED NUMBER OF PAY TELEPHONE INSTRUMENTS THE APPLICANT PLANS TO PLACE IN THE FIRST YEAR: 10

11. HOW DOES THE APPLICANT INTEND TO SERVICE AND MAINTAIN EACH PAYPHONE?

- PERSONALLY
- FULL-TIME TECHNICIAN
- PART-TIME TECHNICIAN
- SERVICE/REPAIR/MAINTENANCE CONTRACT
- OTHER, DESCRIBE

[  
✓  
]  
  
[  
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]  
  
[  
]

12. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL PROVIDE ACCESS TO ALL LOCALLY AVAILABLE LONG DISTANCE CARRIERS VIA 10XXX+0, 950-XXXX, AND 1-800? (See Rule 25-24.515(6), F.A.C.)

YES

13. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL CONFORM TO SUBSECTIONS 4.29.2 - 4.29.4 and 4.29.7 - 4.29.8 OF THE AMERICAN NATIONAL STANDARDS SPECIFICATIONS FOR MAKING BUILDINGS AND FACILITIES ACCESSIBLE AND USABLE BY PHYSICALLY HANDICAPPED PEOPLE (ATTACHMENT F)? (See Rule 25-24.515(14), F.A.C.)

YES

I, THE UNDERSIGNED OWNER OR OFFICER OF THE ABOVE NAMED ENTITY, HAVE READ THE FOREGOING AND DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE INFORMATION IS A TRUE AND CORRECT STATEMENT. I AM AWARE THAT PURSUANT TO s. 837.06, FLORIDA STATUTE, WHOEVER KNOWINGLY MAKES A FALSE STATEMENT IN WRITING WITH THE INTENT TO MISLEAD A PUBLIC SERVANT IN THE PERFORMANCE OF HIS OFFICIAL DUTY SHALL BE GUILTY OF A MISDEMEANOR OF THE SECOND DEGREE. I WILL COMPLY WITH ALL CURRENT AND FUTURE COMMISSION REQUIREMENTS REGARDING THE PAY TELEPHONE SERVICE. I UNDERSTAND THAT A NON-REFUNDABLE APPLICATION FEE OF \$100 MUST ACCOMPANY THE APPLICATION. ALSO, I UNDERSTAND THAT I AM REQUIRED TO PAY A REGULATORY ASSESSMENT FEE (MINIMUM \$50.00 PER CALENDAR YEAR), FILE AN ANNUAL PAY TELEPHONE SERVICE REPORT, AND PAY GROSS RECEIPTS TAX. FURTHERMORE, I AGREE TO KEEP THE COMMISSION ADVISED OF ANY CHANGES IN THE NAMES OR ADDRESSES LISTED ABOVE WITHIN TEN (10) DAYS OF THE CHANGE.

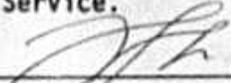
PRESIDENT   
(SIGNATURE OF OWNER/CHIEF OFFICER OF APPLICANT)

DATE: 3-17-96

APPLICANT ACKNOWLEDGEMENT CARD

Applicant LAWRENCE FOOD MARKET INC

I acknowledge receipt and understanding of the Florida Public Service Commission's Rules and Requirements relating to my provision of Pay Telephone Service.

Signature 

Title PRESIDENT

Date 3-17-96

THIS MUST BE COMPLETED AND RETURNED WITH THE APPLICATION BEFORE THE CERTIFICATION PROCESS BEGINS. FAILURE TO DO SO WILL RESULT IN A DELAY OF THE CERTIFICATE BEING ISSUED.



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

May 2, 1994

ELIE JOUNI  
124 ALPINE RD.  
WEST PALM BEACH, FL 33405



The Articles of Incorporation for LAWRENCE FOOD MARKET, INC. were filed on April 28, 1994, and assigned document number P94000032848. Please refer to this number whenever corresponding with this office.

A corporation annual report will be due this office between January 1 and May 1 of the year following the calendar year of the file date. A Federal Employer Identification (FEI) number will be required before this report can be filed. Please apply NOW with the Internal Revenue Service by calling 1-800-829-3676 and requesting form SS-4.

Please be aware if the corporate address changes, it is the responsibility of the corporation to notify this office.

Should you have any questions regarding corporations, please contact this office at the address given below.

Sincerely,  
Brendolyn Bruton  
Corporate Specialist  
New Filings Section  
Division of Corporations

Letter Number: 794A00020044

FILED  
1934 APR 28 AM 9:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION  
OF  
LAWRENCE FOOD MARKET, INC.**

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

**ARTICLE I. NAME**

The name of the corporation is Lawrence Food Market, Inc.

**ARTICLE II. PRINCIPAL OFFICE**

The principal place of business and address of this corporation shall be: 124 Alpine Road, West Palm Beach, Florida 33405.

**ARTICLE III. CAPITAL STOCK**

The maximum number of shares of stock that this Corporation is authorized to issue and have outstanding at any one time is 100,000 shares of common stock having a par value of \$.01 (one/hundredth of a dollar).

**ARTICLE IV. REGISTERED AGENT AND INITIAL REGISTERED OFFICE.**

The name of the initial registered agent is: Elie Jouni.

The address of the registered office of the corporation is: 124 Alpine Road, West Palm Beach, Florida 33405.

The Board of Directors from time to time move the registered office to any other address in the State of Florida.

**ARTICLE V. BOARD OF DIRECTORS.**

The Corporation shall have one director initially. The number of directors may be increased or diminished from time to time, as provided in the bylaws adopted by the shareholders, but shall never be less than one.

**ARTICLE VI. INCORPORATOR.**

The name and street address of the person signing these Articles of Incorporation is: Elie Jouni, 124 Alpine Road, West Palm Beach, Florida 33405.

**ARTICLE VII. AMENDMENT.**

These Articles of Incorporation may be amended in the manner provided by law.

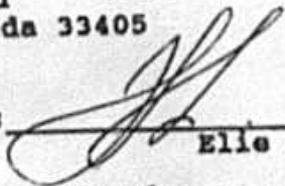
CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: Lawrence Food Market, Inc.
2. The name and address of the registered agent and office is:

Elie Jouni  
124 Alpine Road  
West Palm Beach, Florida 33405

SIGNATURE: \_\_\_\_\_

  
Elie Jouni

TITLE: \_\_\_\_\_

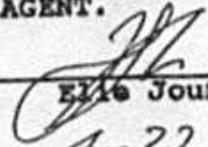
PRESIDENT

DATE: \_\_\_\_\_

4-27-94

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE: \_\_\_\_\_

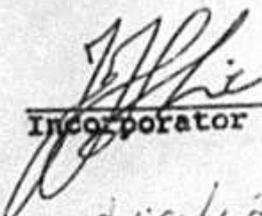
  
Elie Jouni

DATE: \_\_\_\_\_

4-27-94

FILED  
1994 APR 28 AM 9:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

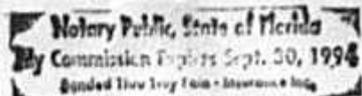
IN WITNESS WHEREOF, the undersigned as Incorporator, has executed the foregoing Articles of Incorporation on the date set out below.

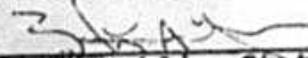
  
\_\_\_\_\_  
Incorporator

April 26, 94  
Date

STATE OF FLORIDA  
COUNTY OF PALM BEACH

Before me, a Notary Public, this 26 day of April, 1994 personally appeared Elie Jouni, who is known to be the person described as Incorporator and who executed the foregoing Articles of Incorporation, and acknowledged before me that s/he subscribed to these Articles of Incorporation on the date set out above.



  
\_\_\_\_\_  
Notary Public State  
of Florida at Large

Commission expiration:

(Notary Seal)

Subscription Agreements and to issue the shares provided for therein upon receipt of the purchase price as provided therein.

The officers of the Corporation are authorized and directed to pay all reasonable and proper expenses incident to the organization of this Corporation and to reimburse any person making any disbursements for this Corporation.

The President or Vice President of this Corporation is authorized to enter into any and all Contracts and/or agreements on behalf of this Corporation as they shall in their sole discretion deem appropriate.

ELIE JOUNI, President, Sole Director



Date: \_\_\_\_\_

4 - 29 - 94

SHARE SUBSCRIPTION AGREEMENT

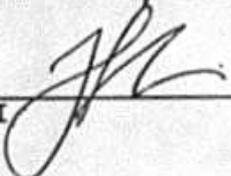
To the Board of Directors of  
Lawrence Food Market, Inc., a corporation formed or to be formed  
under the laws of the State of Florida

The undersigned (the "Subscriber") subscribes for 100  
shares (the "Shares") of \$.01 par value common stock of Lawrence  
Food Market, Inc., a corporation formed or to be formed under the  
laws of the State of Florida (the "Company").

The Subscriber agrees to pay One dollar per share to the  
Company upon organization of the Company and acceptance of this  
subscription as consideration for the Shares. The Subscriber  
agrees that the Subscriber shall not be entitled to certificates  
evidencing the Shares, nor to vote the Shares, until the purchase  
price for the Shares has been paid in full.

The Subscriber represents that this purchase of the Shares is  
for investment for the Subscriber's own account.

This 29 day of April 1994

  
\_\_\_\_\_  
ELIE JOUNI

ACCEPTED:

LAWRENCE FOOD MARKET, INC.

By: ELIE JOUNI 

Title: President

Date: 4-29-94





NO. 1

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INCORPORATED UNDER THE LAWS OF THE STATE OF FLORIDA

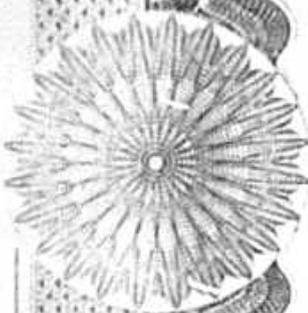
# LAWRENCE FOOD MARKET, INC.

The Corporation is authorized to issue 100,000 Common Shares - Par Value \$0.01 each

This Certifies that **Elie Jouni** is the owner of one hundred (100) shares fully paid and non-assessable. Shares of the above Corporation transferable only on the books of the Corporation by the holder hereof in person or by duly authorized Attorney upon surrender of this Certificate properly endorsed.

In Witness Whereof, the said Corporation has caused this Certificate to be signed by its duly authorized officers and to be sealed with the Seal of the Corporation.

Dated Apr. 1 29, 1954



*J. L.*

Assistant Secretary

*J. L.*

President