2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 16, 2007
Secretary of State

DOCUMENT# P93000077057

Entity Name: SOFTWARE FX, INC.

Current Principal Place of Business:

5901 BROKEN SOUND PKWY NW
SUITE 400
BOCA RATON, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

5901 BROKEN SOUND PKWY NW
SUITE 400
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 65-0447728 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARCIA, RENE
5901 BROKEN SOUND PKWY NW
#400
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GARCIA, RENE
Address: 5901 BROKEN SOUND PKWY NW #400
City-St-Zip: BOCA RATON, FL 33487 US

Title: VP ( ) Delete
Name: CEGARRA, JUAN C
Address: 5901 BROKEN SOUND PKWY NW #400
City-St-Zip: BOCA RATON, FL 33487 US

Title: S ( ) Delete
Name: ARRESE-IGOR, FELIX
Address: 5901 BROKEN SOUND PKWY NW #400
City-St-Zip: BOCA RATON, FL 33487 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP ( ) Change (X) Addition
Name: PADRON, FRANCISCO
Address: 5901 BROKEN SOUND PKWY NW #400
City-St-Zip: BOCA RATON, FL 33487 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RENE GARCIA P 07/16/2007

Electronic Signature of Signing Officer or Director Date