2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000101105

City-St-Zip:

MIAMI, FL 33131

FILED Jan 15, 2009 Secretary of State

Entity Nai	me: EXTEND	PILOT SOFTWARE, INC.			
Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
2600 DOUGLAS RD PH 6 CORAL GABLES, FL 33134			PH 6	2600 DOUGLAS ROAD PH 6 CORAL GABLES, FL 33134	
Current Mailing Address:			New Mailing Addı	New Mailing Address:	
2600 DOUGLAS RD PH 6 CORAL GABLES, FL 33134			PH 6	2600 DOUGLAS ROAD PH 6 CORAL GABLES, FL 33134	
FEI Number:	: 65-1054455	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
PADIAL, JOSE I 2600 DOUGLAS RD PH 6 CORAL GABLES, FL 33134 US The above named entity submits this statement for the purpose of			PH 6 CORAL GABLES, F	2600 DÓUGLAS ROAD PH 6 CORAL GABLES, FL 33134 US	
	e of Florida.	·			
SIGNATURE:				01/15/2009	
	Electron	ic Signature of Registered Age	ent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAM	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () MARQUES, RIC 245 SE 1 ST MIAMI, FL 331		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () DE ARAUJO, PA 245 SE 1 ST MIAMI, FL 331		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	S () MIRANDA, ROE 245 SE 1 ST.	Delete ERTO	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: PAULO DE ARAUJO VΡ 01/15/2009