2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000004066

DOCUMENT # F0100004066 1. Entity Name SOFTWARE HOUSE INTERNATIONAL, INC.				Jul 16, 2002 8:00 am Secretary of State 07-16-2002 90359 004 ***550.00	
Principal Place of Business 2 RIVERVIEW DRIVE SOMERSET NJ 08873		Mailing Address 2 RIVERVIEW DRIVE SOMERSET NJ 08873			
2. Principal	Place of Business	3. Mailing Address			
Suite, Apt. #, etc. S		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State		City & State		4. FEI Number 22-3009648 Applied For	
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional	
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent	
BENCH, MICHAEL 241 DUNCAN LOOP WEST #308 DUNEDIN FL 34698			Name Street Addres	ss (P.O. Box Number is Not Acceptable)	
8. The above the obliga SIGNATURE	mons or registered agent.		City s registered office or regis	Stered agent, or both, in the State of Florida. I am familiar with, and acceptained when reinstating) DATE	
Tax filing (See crite	oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	After September 1:	!!! FEE IS \$550.00 3, 2002 Fee will be \$75 ble to Department of S	50.00 Trust Fund Contribution. State \$5.00 May Be Added to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEE, THAI 2 RIVERVIEW DRIVE SOMERSET NJ	DIRECTORS Delete	12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO LEO, KOGUAN 2 RIVERVIEW DRIVE SOMERSET NJ	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Additio	
NAME STREET AODRESS CITY-ST-ZIP	S NG, PAUL 2 RIVERVIEW DRIVE SOMERSET NJ	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME Street address City-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
of the corn	ertify that the information supplied with the on this report or supplemental report is trooration or the receiver or trustee empoyor on an attachment with an address,	and to average this reserve	the exemption stated in S y signature shall have the as required by Chapter 60	Section 119.07(3)(i), Florida Statutes. I further certify that the information e same legal effect as if made under oath; that I am an officer or director 07, Florida Statutes; and that my name appears in Block 11 or Block 12 if	

SIGNATURE:

Daytime Phone #

FILED