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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

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Feb 12 1997 8:00am

Secretary of State

Daylime Phone #

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # F9300004316 (6)

SPEEDWARE USA INC.

appears in Block 12 or Block 13

SIGNATURE:

Principal Place of Business Mailing Address 3300 COTE VERTU. #303 1 MEADOWLANDS PLAZA, #701 SAINT-LAURENT, QUESEC EAST RUTHERFORD NJ 07073-2137 CANADA HAR 2B8 3. Date Incorporated or Qualified 3a. Date of Last Report 09/23/1993 02/09/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 13-3320017 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Country Zip Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 24 25 29 Florida-Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 City 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 CALA ALBURY directors. I hereby accept the appointment as registered agent. I am familiarly with, and accept the obligations of Section 607.0505, Florida Statement for the purpose of changing its registered agent. I am familiarly with, and accept the obligations of Section 607.0505, Florida Statement for the purpose of changing its registered agent. I am familiarly with and accept the obligations of Section 607.0505, Florida Statement for the purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its registered agent. I am familiarly with a purpose of changing its re SIGNATURE (NOTE: Registered Agent algorature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE FARQUHARSON, IAN 1.2 NAME NAME 98 ALCORN AVE., TORONTO 1.3 STREET ADDRESS STREET ADDRESS ONTARIO, CANADA M4V 1E4 CITY-ST-ZIP 1.4 CITY-ST-ZIP Y Change DP ___ Addition DELETE TITLE 2.1 TITLE THEORET, JEAN-PIERRE 22 NAME NAME 1000 CH. DES PIERRES. PIEDMONT 718 VAL de Loire, 67. Adolph d'Howard 2.3 STREET ADDRESS STREET ADDRESS **QUEBEC, CANADA JOR 1KO** CITY-ST-7IP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE HEATER, KAREN NAME 3.2 NAME 54 CHELSEA AVE. STREET ADDRESS 3.3 STREET ADDRESS TORONTO, ONTARIO M6P 1C1 CITY - ST - ZIP 3.4 CITY-ST-ZIP DELETE Change Addition VP TITLE 4.1 TITLE CHAMBERS, RANDY 4 2 NAME NAME **6 BEAUBOIS** STREET ADDRESS 4.3 STREET ADDRESS KIRKLAND, QUEBEC H9J3W1 CHTY-ST-ZiP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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 dorporation or the receiver on trustee impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name