

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
Division of Corporations

**APPROVED
AND
FILED**

95 MAY -1 PM 8:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F94000001519 (7)**

1. Corporation Name

ABLESOFT CORPORATION

DO NOT WRITE IN THIS SPACE

Principal Place of Business

**3730 NW 56TH PLACE
GAINESVILLE FL 32606**

Mailing Address

**3730 NW 56TH PLACE
GAINESVILLE FL 32606**

3. Date Incorporated or Qualified

03/25/1994

3a. Date of Last Report

2. Principal Place of Business

21 2230 NW 57th Terrace

2b. Mailing Address

26 5200 NW 43rd Street

State, Apt. #, etc.

State, Apt. #, etc.

22 Gainesville FL

27 #102-336

City & State

City & State

23 Gainesville FL

28 Gainesville FL

Zip

Country

Zip

Country

24 32605

25 USA

29 32606

30 USA

4. FEI Number

59-3225316

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for managing tax under Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

**ARROYO, JAVIER A
3730 NW 56TH PLACE
GAINESVILLE FL 32606**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2230 NW 57th Terrace

83

84 City

Gainesville

FL

85 Zip Code

32605

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 corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (if registered agent and not a director)

Signature of Registered Agent (if not registered agent and not a director)

Signature of Director (if not registered agent and not a director)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 TITLE

PCT

12.2 NAME

**ARROYO, JAVIER A
3730 NW 56TH PLACE
GAINESVILLE FL**

12.3 STREET ADDRESS

12.4 CITY, ST, ZIP

12.5 TITLE

VS

12.6 NAME

**ARROYO, MILDRED S
3730 NW 56TH PLACE
GAINESVILLE FL**

12.7 STREET ADDRESS

12.8 CITY, ST, ZIP

12.9 TITLE

12.10 NAME

12.11 STREET ADDRESS

12.12 CITY, ST, ZIP

12.13 TITLE

12.14 NAME

12.15 STREET ADDRESS

12.16 CITY, ST, ZIP

12.17 TITLE

12.18 NAME

12.19 STREET ADDRESS

12.20 CITY, ST, ZIP

12.21 TITLE

12.22 NAME

12.23 STREET ADDRESS

12.24 CITY, ST, ZIP

12.25 TITLE

12.26 NAME

12.27 STREET ADDRESS

12.28 CITY, ST, ZIP

12.29 TITLE

12.30 NAME

12.31 STREET ADDRESS

12.32 CITY, ST, ZIP

12.33 TITLE

12.34 NAME

12.35 STREET ADDRESS

12.36 CITY, ST, ZIP

12.37 TITLE

13.1 TITLE

13.2 NAME

5200 NW 43rd St. #102-336

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

Gainesville FL 32606

13.5 TITLE

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY, ST, ZIP

5200 NW 43rd St. #102-336

13.9 TITLE

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY, ST, ZIP

Gainesville FL 32606

13.13 TITLE

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY, ST, ZIP

13.17 TITLE

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY, ST, ZIP

13.21 TITLE

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY, ST, ZIP

13.25 TITLE

13.26 NAME

13.27 STREET ADDRESS

13.28 CITY, ST, ZIP

13.29 TITLE

13.30 NAME

13.31 STREET ADDRESS

13.32 CITY, ST, ZIP

13.33 TITLE

13.34 NAME

13.35 STREET ADDRESS

13.36 CITY, ST, ZIP

13.37 TITLE

13.38 NAME

13.39 STREET ADDRESS

13.40 CITY, ST, ZIP

SIGNATURE:

Javier A. Arroyo

JAVIER A. ARROYO

4/26/95

377-7563 (904)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR