


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2007 8:00 am**  
**Secretary of State**

05-04-2007 90084 009 \*\*\*150.00

<b>DOCUMENT # F98000006655</b>					
1. Entity Name <b>SOFTTEK INTEGRATION SYSTEMS, INC.</b>					
Principal Place of Business <b>3003 SUMMIT BLVD SUITE 1500 ATLANTA, GA 30319</b>			Mailing Address <b>3003 SUMMIT BLVD SUITE 1500 ATLANTA, GA 30319</b>		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	04202007    Chg-P    CR2E034 (12/06)	
4. FEI Number <b>91-1864740</b>				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>Jimenez, Marcos</b> <b>3350 SW 148th Ave</b> <b>Suite 110</b> <b>Miramar, FL 33027</b>			Name <b>Fernando Jaramillo</b>		
			Street Address (P.O. Box Number is Not Acceptable)		
			<b>3350 SW 148th Avenue Suite 110</b>		
			City <b>Miramar</b>	FL	Zip Code <b>33027</b>
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <u><i>Benigno Lopez, CEO</i></u> <u>4/26/07</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>BEST, JORGE H</b>		NAME	<b>Best, Jorge H.</b>	
STREET ADDRESS	<b>2217 IVAN ST APT 907</b>		STREET ADDRESS	<b>4316 Morning Circle</b>	
CITY - ST - ZIP	<b>DALLAS, TX 75201</b>		CITY - ST - ZIP	<b>Flower Mound, TX 75028</b>	
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>LOPEZ, BENIGNO</b>		NAME	<b>Lopez, Benigno</b>	
STREET ADDRESS	<b>5002 AUDLEY LANE</b>		STREET ADDRESS	<b>5002 Audley Lane</b>	
CITY - ST - ZIP	<b>NORCROSS, GA 30092</b>		CITY - ST - ZIP	<b>Norcross, GA 30092</b>	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Benigno Lopez, CEO</i></u> <u>4/26/2007</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Date      Daytime Phone #					