

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Murtham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G06059

(1)

1. Corporation Name

HIGH-TECH SOFTWARE CORPORATION



Principal Place of Business

543 NW 77TH ST.
BOCA RATON FL 33487
US

Mailing Address

543 NW 77TH ST.
BOCA RATON FL 33487
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

11/01/1982

3a. Date of Last Report

07/18/1995

4. FEI Number

59-2232573

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

PACANA, RICHARD
543 NW 77TH ST.
BOCA RATON FL 33487

81. Name

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

83

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0507 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 person submitting this statement to the Secretary of State

Signature of Registered Agent (must be signed before filing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

☐ Change ☐ Addition

NAME
PACANA, RICHARD A.
STREET ADDRESS
543 NW 77TH ST.
CITY-STATE-ZIP
BOCA RATON FL

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP

TITLE ☐ DELETE

☐ Change ☐ Addition

NAME
GENA, SUSAN H.
STREET ADDRESS
543 NW 77TH ST.
CITY-STATE-ZIP
BOCA RATON FL

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY-STATE-ZIP

TITLE ☐ DELETE

☐ Change ☐ Addition

NAME
GENA, SUSAN H.
STREET ADDRESS
543 NW 77TH ST.
CITY-STATE-ZIP
BOCA RATON FL

9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY-STATE-ZIP

TITLE ☐ DELETE

☐ Change ☐ Addition

NAME
NAGEL, CARLA J.
STREET ADDRESS
543 NW 77TH ST.
CITY-STATE-ZIP
BOCA RATON FL

13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY-STATE-ZIP

TITLE ☐ DELETE

☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY-STATE-ZIP

TITLE ☐ DELETE

☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Susan H. Gena

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/30/96

Date

407-998-2424

Daytime Phone #

CR2E034 (12/95)