

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**Apr 29, 1999 8:00 am**  
**Secretary of State**

04-29-1999 90100 035 \*\*\*150.00

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katharine Harris</b> Secretary of State <b>DIVISION OF CORPORATIONS</b>
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**DOCUMENT # G06059**

1. Corporation Name  
**HIGH-TECH SOFTWARE CORPORATION**



Principal Place of Business 7601 N FEDERAL HWY SUITE 240A BOCA RATON FL 33487 US	Mailing Address 7601 N FEDERAL HWY SUITE 240A BOCA RATON FL 33487 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1301 N. Congress Ave. Suite, Apt. #, etc. 22 Suite 340 City & State 23 Boynton Beach, FL Zip Country 24 33426 25 US		2a. Mailing Address 26 1301 N. Congress Ave. Suite, Apt. #, etc. 27 Suite 340 City & State 28 Boynton Beach, FL Zip Country 29 33426 30 US		3. Date Incorporated or Qualified 11/01/1982	4. FEI Number 59-2232573	Applied For No Applicable
				5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
				8. This corporation owes the current year intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent PACANA, RICHARD 7601 N FEDERAL HWY, SUITE 240A STE #220 BOCA RATON FL 33487				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 1301 N. Congress Ave. 83 Suite 340 84 City Boynton Beach FL 85 Zip Code 33426			
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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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PACANA, RICHARD A.	1.2 NAME	
STREET ADDRESS	7601 N FEDERAL HWY, SUITE 240A	1.3 STREET ADDRESS	1301 N. Congress Ave, Suite 340
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	Boynton Beach, FL 33426
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GENA, SUSAN H	2.2 NAME	
STREET ADDRESS	7601 N FEDERAL HWY, SUITE 240A	2.3 STREET ADDRESS	1301 N. Congress Ave, Suite 340
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	Boynton Beach, FL 33426
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GENA, SUSAN H	3.2 NAME	
STREET ADDRESS	7601 N FEDERAL HWY, SUITE 240A	3.3 STREET ADDRESS	1301 N. Congress Ave, Suite 340
CITY-ST-ZIP	BOCA RATON FL	3.4 CITY-ST-ZIP	Boynton Beach, FL 33426
TITLE	T <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NAGEL, CARLA J.	4.2 NAME	
STREET ADDRESS	7601 N FEDERAL HWY, SUITE 240A	4.3 STREET ADDRESS	1301 N. Congress Ave, Suite 340
CITY-ST-ZIP	BOCA RATON FL	4.4 CITY-ST-ZIP	Boynton Beach, FL 33426
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 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 307, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Susan H. Gena Susan H. Gena 04-23-99 561-742-1212  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)

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