SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # J46503 (5)

1. Corporation Name

FIRST RATE SOFTWARE, INC.

Principal Place of Business	Mailing Address
% JOSEPH F. PIPPEN, JR 210 N.E. 51ST COURT FT. LAUDERDALE FL 33334	% JOSEPH F. PIPPEN, JR 210 N.E. 51ST COURT FT. LAUDERDALE FL 33334

3. Date Incorporated or Qualified: 12/09/1986
3a. Date of Last Report: 04/25/1995
4. FEI Number: 59-2740730 — 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

2. Principal Place of Business	2a. Mailing Address
21 5 King View Rd	26 5 Kings View Rd
22 Suite, Apt. #, etc	27 Suite, Apt. #, etc
23 City & State: Marlborough, MA	28 City & State: Marlborough MA
24 Zip: 01752 · 25 Country: U.S.A.	29 Zip: 01752 · 30 Country: U.S.A.

9. Name and Address of Current Registered Agent

PIPPEN, JOSEPH F., JR
655 ULMERTON RD SE
BLDG 11
LARGO FL 33543

10. Name and Address of New Registered Agent

81 Name: Richard Altshuler
82 Street Address (P.O. Box Number is Not Acceptable)
83 9655 South Dixie Hwy, Suite 210
84 City: Miami FL 85 Zip Code: 33156

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: Richard Altshuler — July 30, 1996
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	☐ DELETE	1.1 TITLE	☑ Change ☐ Addition
NAME	HOUSTON, JAMES		1.2 NAME	Houston, James
STREET ADDRESS	210 N.E. 51ST COURT		1.3 STREET ADDRESS	5 Kings View Rd
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-ST-ZIP	Marlborough MA 01752
TITLE		☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (3/96)

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] — 7/26/96 — (508) 303-[illegible]0011
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #