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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K32586

(5)

INTERNATIONAL COMPUTER & SOFTWARE CORP.

3. Date Incorporated or Qualified 3a. Date of Last Report

**FILED** 

Jan 24 1997 8:00am

Secretary of State

Ma	ilina	Addras	20

% ROBERT A. BRANDT 9191 CORAL WAY: 9-900 MIAMI FL 33145-3218

				09/07/1988	03/29/1996
21 C/O K	20 bert Brandt	26 Go Rober	+ Brand+	4. FEI Number NOT APPLICABLE	Applied For Not Applicable
	5. NE 15 ST # 709		ST #709	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	iami, FL	City & State 1	FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zp 24 33 13	32 Country 25 USA	<sup>Zip</sup> 33182	Country	8. This corporation has liability for	intangible tax under s. 199.032,
24 00 1.	9. Name and Address of Current		30  0 5	Florida Statutes  10. Name and Address of New R	**** · · · · · · · · · · · · · · · · ·
	ANDT, ROBERT A. 1 CORAL WAY		81 Name		
SUITE 900				Address (P.O. Box Number is Not Accepte	DE-
	MI FL 93145 -		83		
[			84 City	6 4 6	85 Zin Code
4.5		·		Conut Grove	FL     33133
11. Pursuant office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State o	and 607,1508, Florida Statut f Florida_Such change was a	es, the above-named authorized by the corp	corporation submits this statement for the oration's board of directors. I hereby acce	purpose of changing its registered ept the appointment as registered
	im familiar with, and accept the obligati	ons of Section 607.0505, Flo	orida Statutes	oration's board of directors. I hereby acce	1-15-97
SIGNATURE	Signature, typed scorping traine of regularist agent	a o title it applicable (NOT	E: Registered Agent signature	required when reinstating)	OATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	FUSCO, TERESA, S		1.2 NAME		·
STREET ADDRESS	3191 CORAL WAY 900		1.3 STREET ADDRESS	3350 SW 27 AU	enve
CITY-ST-ZIP	MAMI-FL-		1.4 CITY - ST - ZIP	Coconut Grove	
TATLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIF		T DELETE	2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME PROJECT ADAPTOR			3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
CITY-ST ZIP TITLE		DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME		FTI DELEIE	4.1 TITLE 4.2 NAME		Change Addition
STREET ADORESS					
CITY-ST-ZIP			4.3 STREET ADDRESS		
TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME.			5.2 NAME		Em orango Em radición
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-SI-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 - 7IP		•

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an altacyment with an address.

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/97

305/448-270