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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # L57

TAILORED SOFTWARE, INC.

(6)

FILED Jan 15 1997 8:00am Secretary of State

Principal Place 15323 SW 1111 MIAMI FL 3319 US	TH ST.	T. X8							
					3. Date Incor 03/12/19	porated or Qualified 990		ate of Last Re /18/1996	port
	ace of Business	2a. Mailing Address	3		4. FEI Numb			 	olied For
Suite, Apt. 4	#. etc.	26			65-018			\$8.75 A	Applicable
22						of Status Desired	D2"	Fee Red	
City & State		City & State			1	ampaign Financing	<u></u>	\$5.00	
23 Zip	Country	28	Countr	0/		Contribution	1-4	Added to	
24	25	29	30	.,	Florida Sta	oration has liability for i	Intangible Yes		199.032,
	9. Name and Address of Curre					d Address of New Re	gistered	Agent	
	EGON, JAIME E		8	1 Name					
15323 SW 111TH ST.				2 Street Add	lress (P.O. Box Nu	mber is Not Acceptat	ole)	· · · · · · · · · · · · · · · · · · ·	
SUITE 206			8:			- 			
MIA	MI FL 33198		6	3					
			B	4 City			FL	85 Zip C	ode
11. Pursuant to	o the provisions of Sections 607.05	502 and 607 1508. Florida	Statutes the abo	ve-pamed cor	noration submits t	his statement for the r			registered
SIGNATURE	Signature typest or period issue of registered a OFFICERS A	agent and tille it app «able NDD DIRECTORS	(NOTE Registered A			/CHANGES TO OFFIC	DATE CERS AN		S IN 12
TITLE	PTD	DELE1	TE 1.1 TITLE	<u> </u>	3 D			Change	Addition
NAME	OBREGON, JAIME E.		1.2 NAME	E N	AIME E.	SW III ST	T		
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CITY-ST-ZIP	MIAMI FL VSD	DELFI	1.4 CrYY-		IMMI		1-	Change	Addition
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Too nereby definity that the information supplied with this mining does not quality 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0254362