FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 20, 2002 8:00 am Secretary of State P00000055157 DOCUMENT # . Entity Name GLOBAL SOFTWARE SOLUTIONS, INC. 02-20-2002 90120 015 ***150.00 Mailing Address rincipal Place of Business 903 PINELLAS BAY WAY #308 903 PINELLAS BAY WAY #308 TIERRA VERDE FL 33715 TIERRA VERDE FL 33715 Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 59-3654412 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City Zip Code The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 1. ☐ Delete ☐ Addition ÎTLE TITLE GERKEN, JOHN D IAME NAME TREET ADDRESS 6236 WEST LONG DRIVE STREET ADDRESS LITTLETON CO 80123 CITY-ST-ZIP TY-ST-ZIP İTLE ☐ Delete ☐ Change ☐ Addition TITLE AME KERR, ROGER A NAME TREET ADDRESS STREET ADDRESS 19317 RANWORTH DRIVE ity-st-zip **GERMANTOWN MD 20874** CITY-ST-ZIP ÎTLE ☐ Delete Addition TITLE ☐ Change BOYD, KEVIN AME NAME TREET ADDRESS 903 PINELLAS BAY WAY #308 STREET ADDRESS STY-ST-ZIP TIERRA VERDE FL 33715 CITY-ST-ZIP İTLE ☐ Delete TITLE ☐ Change ☐ Addition ÎAME NAME TREET ADDRESS STREET ADDRESS ITY-ST-ZIP CITY-ST-ZIP ITLE ☐ Delete Change ☐ Addition AME TREET ADDRESS STREET ADDRESS ITY-ST-ZIP CITY-ST-ZIP ITLE TITLE ☐ Change ... ☐ Addition ☐ Delete AME NAME TREET ADDRESS STREET ADDRESS ITY-ST-ZIP CITY-ST-ZIP 3. 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 report or supplemental 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 11 or Block 12 if

changed, or on an attachment with an address, with all other like empowered