## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED May 27, 2002 8:00 am Secretary of State

ONIFORM BUSINESS REPURT (UBK)					Carrada C C4-4-	
DOCUMENT # P01000086975 \					Secretary of State	
1. Entity Name					05-27-2002 90413 03:	2 ***150.00
OTARI SOFTWARE, INC.						
1700 S. Dixie Hwy., Suite 103 Boca Raton, FL 33432						
	DO NOT WRITE	IN THIS SP	PACE			
2. Principal Place of Business 1700 S. Dixie Hwy.  Suite, Apt. #, etc.  3. Mailing Address 1700 S. Dix: Suite, Apt. #, etc.			ie Hwy.			
Suite Apr.	Suite, Apt. #, etc. Suite 103			DO NOT WRITE IN THIS SPACE		
City & State City & State				4. FEI Number Applied For		
Zip	Raton, FL Country	Boca Raton,	<b>F'L</b> Country		65-1134752	Not Applicable
33432	USA	33432	USA	5		3.75 Additional e Required
			Name	7.	Name and Address of Current Registered A	gent
DO NOT WOITE Xavi					er-J-Wahner	
معاد عدي <u>ة "</u> راياد"		Street	Street Address (P.O. Box Number is Not Acceptable)			
	IN THIS SP	ACE	City	1700	S. Dixie Hwy., Suite	
			City	Boca		Zip Code 33432
8. The above	e named entity submits this statement for	the purpose of changing its re	egistered office of	or registered a	agent, or both, in the State of Florida.	
SIGNATURE	•					
SIGNATURE	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE:	Registered Agent signa	ture required whe	n reinstating) DATE	
9. This corporation is eligible to satisfy its Intangible  Tay filing requirement and elects to do so  After May 1, Fee is \$550.00					10. Election Campaign Financing	\$5.00 May Be
			<b>UBR is \$61.25</b>		Trust Fund Contribution.	Added to Fees
11.	OFFICERS AND D		e to Departmen	it of State		-
TITLE	PD		THTLE			£
NAME STREET ADDRESS	ERIC M. WARNER		NAME Street address			(12)
CITY-ST-ZIP	Boca Raton, FL 3	33432	CITY-ST-ZIP			R2E034B (12/01)
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13. 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Ku

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eric M. Wahner

4/29/03

954-699-9092

Daytime Phone #