

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000033916

FILED
Jan 22, 2004
Secretary of State

Entity Name: PARKER SOFTWARE DEVELOPMENT, INC.

Current Principal Place of Business:

13446 SW 62ND STREET #E-105
MIAMI, FL 33183

New Principal Place of Business:

9617 NW 7 CIRCLE APT 332
#332
PLANTATION, FL 33324 US

Current Mailing Address:

13446 SW 62ND STREET
E-108
MIAMI, FL 33183

New Mailing Address:

9617 NW 7 CIRCLE APT 332
#332
PLANTATION, FL 33324 US

FEI Number: 03-0415380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIVISONNO, MIKE
13446 SW 62ND STREET
E-108
MIAMI, FL 33183 US

Name and Address of New Registered Agent:

TRIVISONNO, MIKE
9617 NW 7 CIRCLE APT 332
#332
PLANTATION, FL 33324 US

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: MIKE TRIVISONNO

01/22/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TRIVISONNO, MIKE
Address: 13446 SW 62ND STREET #E-108
City-St-Zip: MIAMI, FL 33183

Title: VD () Delete
Name: KEUNG, DEREK
Address: 13446 SW 62ND STREET #E-105
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TRIVISONNO, MIKE
Address: 9617 NW 7 CIRCLE APT 332
City-St-Zip: MIAMI, FL 33324 US

Title: VD (X) Change () Addition
Name: KEUNG, DEREK
Address: 251 NW 118 AVE
City-St-Zip: CORAL SPRINGS, FL 33071 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIKE TRIVISONNO

PD

01/22/2004

Electronic Signature of Signing Officer or Director

Date