

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90378 022 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000072739						11038629	
1. Entity Name BLIP SOFTWARE SOLUTIONS, INC.							
Principal Place of Business 750 FENTRESS BLVD DAYTONA BCH, FL 32114				Mailing Address 750 FENTRESS BLVD DAYTONA BCH, FL 32114			
2. Principal Place of Business				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number 04-3679846						Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>						8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
SASSER, DAVID 750 FENTRESS BLVD DAYTONA BCH, FL 32114				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City		FL	
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE: DAVID SASSER / V.P.				SIGNATURE: <i>David Sasser</i>		DATE: 4-30-03	
<small>Signature, typed or printed name of registered agent and the applicant.</small>				<small>(NOTE: Registered Agent Signature required when re-registering)</small>		<small>DATE</small>	
FILE NOW WITH FEE IS \$160.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	D <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SASSER, DAVID			NAME			
STREET ADDRESS	750 FENTRESS BLVD			STREET ADDRESS			
CITY-ST-ZIP	DAYTONA BCH, FL 32114			CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GUARDINO, JAMES A			NAME			
STREET ADDRESS	750 FENTRESS BLVD			STREET ADDRESS			
CITY-ST-ZIP	DAYTONA BCH, FL 32114			CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BRADLEY, KENNY			NAME			
STREET ADDRESS	750 FENTRESS BLVD			STREET ADDRESS			
CITY-ST-ZIP	DAYTONA BCH, FL 32114			CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LIEBETRAU, KURT			NAME			
STREET ADDRESS	750 FENTRESS BLVD			STREET ADDRESS			
CITY-ST-ZIP	DAYTONA BCH, FL 32114			CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: <i>David Sasser</i>				SIGNATURE: DAVID SASSER		DATE: 4-30-03	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>DATE</small>		<small>Daytime Phone #</small>	

CRREG34 (10/02)