2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000103274

Entity Name: REFLECTIVE SOFTWARE, INC.

FILED Feb 04, 2003 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

82 RAMBLEWOOD DRIVE 92 RAMBLEWOOD DRIVE PALM COAST, FL 32164 PALM COAST, FL 32164

Current Mailing Address: New Mailing Address:

82 RAMBLEWOOD DRIVE 92 RAMBLEWOOD DRIVE PALM COAST, FL 32164 PALM COAST, FL 32164

FEI Number: 54-2083553 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LOMBARDO, ROBERTODERIGGI, ANTHONY82 RAMBLEWOOD DRIVE11 SPRING MEADOWSPALM COAST, FL 32164ORMOND BEACH, FL 32174

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: ANTHONY DERIGGI 02/04/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

D () Delete Title: DN (X) Change () Addition

 Name:
 LOMBARDO, ROBERTO
 Name:
 LOMBARDO, ROBERTO

 Address:
 82 RAMBLEWOOD DRIVE
 Address:
 92 RAMBLEWOOD DRIVE

 City-St-Zip:
 PALM COAST, FL 32164
 City-St-Zip:
 PALM COAST, FL 32164

Title: () Delete Title: D/P () Change (X) Addition

 Name:
 Name:
 DERIGGI, ANTHONY

 Address:
 Address:
 11 SPRING MEADOWS

 City-St-Zip:
 City-St-Zip:
 ORMOND BEACH, FL 32174

Title: () Delete Title: D/S () Change (X) Addition

 Name:
 Name:
 URFF, ERIC

 Address:
 Address:
 717 LUNA DR

City-St-Zip: City-St-Zip: ORMOND BEACH, FL 32176

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: ERIC URFF D 02/04/2003