## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000028208

Entity Name: DECISIVE SOFTWARE, INC.

FILED Feb 27, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1601 HARBOUR SIDE DRIVE WESTON, FL 33326 **Current Mailing Address: New Mailing Address:** 1601 HARBOUR SIDE DRIVE WESTON, FL 33326 FEI Number: 57-1156909 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEE, SEAN C 1601 HARBOUR SIDE DRIVE WESTON, FL 33326 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition LEE, SEAN C Name: LEE, SEAN C Name: 1601 HARBOUR SIDE DRIVE 1601 HARBOUR SIDE DRIVE Address: Address: WESTON, FL 33326 US City-St-Zip: WESTON, FL 33326 City-St-Zip: Title: VΡ ( ) Change (X) Addition Title: ( ) Delete Name: Name: SUELS, ALFREDO 537 LIVE OAK LANE Address: Address: WESTON, FL 33327 US City-St-Zip: City-St-Zip: Title: () Delete Title: VΡ ( ) Change (X) Addition ELLIOTT, JOHN Name: Name: 22 PELICAN ISLE Address Address: City-St-Zip: City-St-Zip: FT. LAUDERDALE, FL 33301 Title: () Delete Title: VΡ ( ) Change (X) Addition WILLIAMS, JOSEPH Name: Name: Address: Address: 583 NW 159 AVENUE City-St-Zip: City-St-Zip: PEMBROKE PINES, FL 33028 Title: Title: ( ) Change (X) Addition ( ) Delete LLOMPART, LUIS Name: Name: Address: 15352 SW 32 TERRACE Address: City-St-Zip: City-St-Zip: MIAMI, FL 33185 Title: () Delete Title: ( ) Change (X) Addition BODERO, ALVARO Name: Name: 10953 NW 47TH LANE Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33178

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: SEAN LEE P 02/27/2004