

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000113723

Entity Name: LM SOFTWARE, INC.

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

11945 NW 12TH ST.  
PEMBROKE PINES, FL 33026

**New Principal Place of Business:**

**Current Mailing Address:**

11945 NW 12TH ST.  
PEMBROKE PINES, FL 33026

**New Mailing Address:**

FEI Number: 20-3285607

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CALAD, CLARA  
11945 NW 12TH ST.  
PEMBROKE PINES, FL 33026 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CALAD, CLARA  
Address: 11945 NW 12TH ST.  
City-St-Zip: PEMBROKE PINES, FL 33026

I hereby 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 all other like empowered.

SIGNATURE: CLARA CALAD

PD

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date