SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 P93000018942 (1) **DOCUMENT #** PROFESSIONAL SOFTWARE DEVELOPERS, INC. Principal Place of Business Mailing Address 11047 SW 70TH LANE 11047 SW 70TH LANE MIAMI FL 33173 **MIAMI FL 33173** 3a. Date of Last Report 3. Date Incorporated or Qualified 03/11/1993 08/03/1995 4. FEI Number Applied For 2. Principal Place of Business Mailing Address 65-0400120 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. # etc 5. Cert-ficate of Status Desired Fee Required 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible to under s. 199 032. Florida Statutes Yes No. Country Zip Zio Country 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name PEREZ-ROBELO, RODOLFO A Street Address (P.O. Box Number is Not Acceptable) 11047 SW 70TH LANE 82 MIAMI FL 33173 83 85 Zin Code 84 City Fl 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. DATE (NOTE: Registered Agent signal ire required when revistaring) Signature it, perfor period name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/8)OFFICERS AND DIRECTORS 13. 12. ____ Change ____ Addition DELETE 1 1 TIFLE TITLE CR2E034 1.2 NAME PEREZ-ROBELO, RODOLFO A NAME 13 STREET ADDRESS 11047 SW 70TH LANE STREET ADDRESS **MIAMI FL 33173** 1.4 CITY - \$1 - ZIF CITY-ST-ZIP Change Addition DELETE 2 1 TITLE TITLE 2.2 NAMS NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CHY - ST-ZIP CHY-ST ZiP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 3.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 41 TILLE TITLE 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CHY-ST-ZIP Change nilitibA DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELFIL 6 1 TITLE THILE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am air officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Spock 12 or Block 13 if hydriged, or on an attachment with an address.

KODOLFO A. PERCZ-

SIGNATURE:

196 303-393-065 6 08,000 00