

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

05 MAY -1 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000019400 (9)

1. Corporation Name

AUSTOFT INC.

Principal Place of Business

15790 S TAMiami TR
FT MYERS FL 33908-4278

Mailing Address

15790 S TAMiami TR
FT MYERS FL 33908-4278

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/12/1993

3a. Date of Last Report

04/26/1994

4. FFI Number

65-0395265

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

6. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 Suite Apt # etc

22 City & State

23 Zip

24 Country

2a. Mailing Address

25 Suite Apt # etc

26 City & State

27 Zip

28 Country

9. Name and Address of Current Registered Agent

WEIGH, GRAHAM
15790 S. TAMiami TRAIL
FT. MYERS FL 33908-4278

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

(Signature typed in printed name of registered agent or officer or director)

(Signature typed in printed name of registered agent or officer or director)

(Signature typed in printed name of registered agent or officer or director)

12. OFFICERS AND DIRECTORS

12.1 TITLE	12.2 NAME	12.3 STREET ADDRESS	12.4 CITY, ST, ZIP
D	WEIGH, GRAHAM	3350 N KEY DR #801	FT MYERS FL
D	MCGRATH, CHARLES M	KILLERS RD	QUEENSLAND, AUSTRALIA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	13.2 NAME	13.3 STREET ADDRESS	13.4 CITY, ST, ZIP	Change	Addition
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(b), 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 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 12 or Block 13 of this filing, or on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

05-01-95

813-489-4488