

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 30 AM 8:28

DOCUMENT # P93000053687 (8)

1. Corporation Name

SCIENTECH SOFTWARE INC.

Principal Place of Business

**6761 S.W. 105TH PLACE
MIAMI FL 33173**

Mailing Address

**6761 S.W. 105TH PLACE
MIAMI FL 33173**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **07/30/1983** 3a. Date of Last Report **04/27/1994**

4. FEI Number **65-0430869** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21 **21187 ESCONDIDO WAY**

Suite, Apt. #, etc.

22

City & State

BOCA RATON, FL

Zip

33433

25

Country

2a. Mailing Address

26 **21187 ESCONDIDO WAY**

Suite, Apt. #, etc.

27

City & State

BOCA RATON, FL

Zip

33433

30

Country

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301**

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 required for principal place of business, registered agent, or both, if applicable.

8421 Registered Agent signature required when registering.

10-1

12. OFFICERS AND DIRECTORS

TITLE

P

NAME

Ji, LIREN

STREET ADDRESS

6761 SW 105 PL

CITY, ST, ZIP

MIAMI FL

TITLE

VPS

NAME

SHEN, JING

STREET ADDRESS

6761 SW 105 PL

CITY, ST, ZIP

MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P

1.2 NAME

Ji, LIREN

1.3 STREET ADDRESS

21187 ESCONDIDO WAY

1.4 CITY, ST, ZIP

BOCA RATON, FL 33433

2.1 TITLE

VP/M

2.2 NAME

SHEN, JING

2.3 STREET ADDRESS

21187 ESCONDIDO WAY

2.4 CITY, ST, ZIP

BOCA RATON, FL 33433

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(4)(b), Florida Statutes. I further certify that the information included 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 197, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE OR TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JING SHEN

3/27/95

(407) 852-4711

Date

Original Filing #