FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

TALLAHASSEE, FLORIDA

DOCUMENT # P93000069516 (1)

1. PREMIER LEGAL SOFTWARE, INC.

4801 S. UNIVERSITY DRIVE SUITE 219 DAVIE FL 33328	4801 S. UNIVERSITY DRIVE SUITE 219 DAVIE FL 33328

3. Date of last report filed: 09/30/1993

3a. Date of Last Report: 04/28/1994

4. FEI Number: 65-0443392 (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

7. Is organization affected by provisions of Florida Statutes: Yes / No

9. Name and Address of Current Registered Agent

BREWER, THELDA
4801 S. UNIVERSITY DRIVE
SUITE 219
DAVIE FL 33328

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 Section 607.0501 (3) and/or 617.1501, 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 607.0501, Florida Statutes.

SIGNATURE(S)

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
TITLE: D NAME: BREWER, THELDA STREET ADDRESS: 4801 S. UNIVERSITY DRIVE, SUITE 219 CITY-ST-ZIP: DAVIE FL 33328	Change / Addition
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14. I hereby certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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 below authorizes the officer or director of the corporation to be reinstated or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an asterisk.

SIGNATURE: Thelda Brewer 5/1/95 305-370-1052

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL AUTHORIZED

0235003 CP