FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P93000086885 (9)

SEMINAR SOFTWARE, INC.

FILED Apr 22 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address		a topulote sin inina hinu notit säitt äbitt åtibt if	LICE GILDT LAIDT HÁIÐT ÁFIL JÓÐI
12696 NW 11TH COURT		12696 NW 11TH COURT			
SUNRISE FL 33323		SUNRISE FL 33323			
U\$		US		DO NOT WRITE IN THE	S SPACE
				3. Date Incorporated or Qualified 12/15/1993	
} 1	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0453059	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Country	8. This corporation owes or has paid the p	urreyn year Intangible
24	25		30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registered	d Agent
KAYE, TERI 81 Name					
12696 NW 11TH COURT 82			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
Sunrise FL 33323					_
			83		
1			84 City	F	85 Zip Code
1%. 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.					
13. 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: typed or printed name of registered agent and title diapplicable (NOTE: Registered Agent signature required when reinstating) DATE					
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	Kaye, Perry S		1.2 NAME		
STREET ADDRESS	12696 NW 11TH COURT		1.3 STREET ADDRESS		
CITY-ST-ZIP	SUNRISE FL 33323	\ /	1.4 CITY-ST-ZIP		
TITLE	VID	DELETE	2.1 TITLE		Change Addition
NAME	KAYE, DOUGLAS L		2.2 NAME		
STREET ADDRESS	12696 NW 11TH COURT	`	2.3 STREET ADDRESS		İ
CITY-ST-ZIP	SUNRISE FL 33323		2. 4 CITY-ST-ZIP	• * * · · · · · · · · · · · · · · · · · ·	
TITLE	5	DELETE	3.1 TITLE		Change Addition
NAME	KAYE, STEVEN H	\wedge	3.2 NAME		
STREET ADDRESS	11400 SW 1ST ST.	•	3.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 33071		3.4 CITY-ST-ZIP		
TITLE	CO O	DELETE	4.1 TITLE		Change Addition
NAME	KAYE, TERI		4. 2 NAME		
STREET ADDRESS	12696 NW 11TH COURT		4.3 STREET ADDRESS		
CITY-ST-ZIP	SUNRISE FL 33323		4.4 CITY+ST-ZIP		
TITLE	-	DELETE	5 1 TITLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
	matter than the following the constitution	Table at the difference of the first		A 40 A 60 (A) (1) Pro 1 4 A 6 A 6 A 6 A 6 A 6 A 6 A 6 A 6 A 6 A	

4. I hereby certify that the information supplied with this filing 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 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 3 if changed, or on an attachment with an address.

SIGNATURE:

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