

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000003820 (5)

1. Corporation Name

SOFTECH SYSTEMS, INC.



Principal Place of Business

15059 S.W. 153RD COURT
MIAMI FL 33196

Mailing Address

15059 S.W. 153RD COURT
MIAMI FL 33196

3. Date Incorporated or Qualified

01/14/1994

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

21 15059 SW 153 CT

Suite, Apt. #, etc.

22 City & State

23 MIAMI FL

24 Zip

33196

25 Country

USA

2a. Mailing Address

26 15059 SW 153 CT

Suite, Apt. #, etc.

27 City & State

28 MIAMI FL

29 Zip

33196

30 Country

USA

4. FEI Number

65-0497289

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. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

LOPEZ, RENE G
15059 S.W. 153RD COURT
MIAMI FL 33196

10. Name and Address of New Registered Agent

81 Name RENE G. LOPEZ

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

15059 SW 153 CT

83

84

City MIAMI

FL

85 Zip Code 33196

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

René G. Lopez

RENE G. LOPEZ

3/1/96

Step 3. (Do not type or print name of registered agent if first time in application)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	LOPEZ, RENE G	15059 S W 153 CT	MIAMI FL	☐
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
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TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
2.1 TITLE <td>2.2 NAME</td> <td>2.3 STREET ADDRESS</td> <td>2.4 CITY-ST-ZIP</td> <td>☐</td> <td>☐</td>	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	☐	☐
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6.1 TITLE <td>6.2 NAME</td> <td>6.3 STREET ADDRESS</td> <td>6.4 CITY-ST-ZIP</td> <td>☐</td> <td>☐</td>	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 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 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 if changed, or on an attachment with an address.

SIGNATURE:

René G. Lopez

RENE G LOPEZ

3/1/96

(305) 252-0232

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)