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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000023106 (5) DOCUMENT #

US1 SOFTWARE DEVELOPMENT, INC.

FILED Feb 25 1998 8:00am Secretary of State

|--|--|--|--|

Principal Place	of Business	M	ailing Address			·		
9500 NW 77 AVE SUITE C			9500 NW 77 AVE Suite C			DO NOT WRITE IN THIS SPACE		
HIALEAH GA	ARDENS FL 33016		HIALEAH GARDENS F	r 33016			3. Date Incorporated or Qualified	
							03/25/1994	
2. Principal Pia	ace of Business	2a.	Mailing Address			•——	4. FEI Number Applied For	
21		26	J				65-0476450 Not Applicable	
Suite, Apt	f, etc	1-71	Suite, Apt. #, etc.		····-		S8 75 Additional	
22		27					5. Certificate of Status Desired Fee Required	
City & State	<u> </u>	1	City & State				6. Election Campaign Financing \$5.00 May Be	
23		28					Trust Fund Contribution	
Zip	Country		Zip	Cou	intry		8. This corporation owes or has paid the current year Intangible	
24	25	29		30			Personal Property Tax due June 30. 🔀 Yes 🔲 No	
	9. Name and Address of Currer	nt Regis	lered Agent		Ц,		10. Name and Address of New Registered Agent	
L	OPEZ, VICTOR				81	Name		
95	500 NW 77 AVE				82	Street A	Address (P.O. Box Number is Not Acceptable)	
SI	UITE C							
HI	ALEAH GARDENS FL 33016				83			
					84	City	85 Zip Code	
					-	Ony	FL V Z COOK	
	Signature typed or printed name of respectives are				d Age	nt signature r	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	PD OFFICE HS AIN	CULTURE	DELETE	13.	TI E		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	LOPEZ, VICTOR		C DETTIE	1.1 N		i	C Oppure C Version	
STREET ADDRESS	9500 NW 77 AVE SUITE C					ADDRESS		
CITY-ST-ZIP	HIALEAH GARDENS FL 330	116				1-ZIP		
TITLE		<u> </u>	DELETE	2.1 T		1-21	Change Addition	
NAME				2.2 N				
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP						ST-ZIP		
TITLE			DELETE	3.1 T		" -"	Change Addition	
NAME				32 N	AME	1		
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP						ST-ZIP		
TITLE			DELETE	4.1 T		-	☐ Change ☐ Addition	
NAME				4 2 1	IAME	Ì		
STREET ADORESS				435	TREET	ADDRESS		
CITY-ST-ZIP				44 C	ITY-S	1 - ZIP		
TITLE			DELETE	5 1 T			Change Addition	
NAME				52 N	AME			
STREET ADDRESS				538	TREET	ADDRESS		
CITY-ST-ZIP				5 4 C	ITY-S	T-21P		
TITLE			☐ DELE1E	6.1 T	TLE	T	Change Addition	
NAME				6.2 N	AME			
STREET ADDRESS				6.3 S	TREET	ADDRESS		
CiTY-ST-ZIP					ITY-S			
14. I hereby conditional indicated of	ertify that the information supplied won this annual report or suppliement	vith this f Lannua	filing does not qualify il report is true and ad	for the ex ccurate an	emp d th	tion stated at my sign	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the Information nature shall have the same legal effect as if made under oath; that I am an required by Chapter 607, Florida Statutes; and that my name appears in	