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

PROFIT CORPORATION ANNUAL REPORT

1997

TITLE

NAME

STREET ADDRESS

14. I do hereby certily that the informatio information indicated on this annual I am an officer or director of the o

appears in Block 12 or Block 13

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400067520 (4)

PARADISE SOFTWARE ENGINEERING CORP.

Principal Place of Business Mailing Address 8567 CORAL WAY 8567 CORAL WAY SUITE 125 SUITE 125 MIAM! FL 33155 MIAMI FL 33155-2335 3a. Date of Last Report 3. Date Incorporated or Qualified 09/16/1996 09/14/1994 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0615107 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Country Ζıρ 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent HOLMES, ROBERT G 81 Name 8567 CORAL WAY 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 125** MIAMI FL 33155 83 84 City 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 Signatore, typud or printed takes of requiered agent and lide if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)13. PD Addition DELETE Change TITLE 11 TITLE HOLMES, ROBERT G NAME 12 NAME CR2E034 8567 CORAL WAY STE 125 STREET ADDRESS 13 STREET ADDRESS MIAMI FL 33155 1.4 DITY-ST-ZIP CITY-ST-Z-P SD DELETE Change Addition TITLE 2.1 TITLE HOLMES, MARJORY A 2.2 NAME NAME 8567 CORAL WAY STE.125 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33015** 2. 4 CITY - ST-ZIP CITY - \$1-20 DELETE Change Addition 3.1 TITLE TITLE JORGE DE LA PAZ 3.2 NAME NAME 8567 CORAL WAY STE 125 3.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33155** 3.4. CITY - ST - ZIP CITY-ST ZIP DELETE Change Addition 4.1 TITLE TITLE THOMAS E. HOLMES NAM-4. 2 NAME 8567 CORAL WAY STE.125 4.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33155** CITY - \$1 - 7(P 4.4 CITY-ST-ZIP Addition DELETE 5 1 TITLE Change TITLE STEVEN A. HOLMES 5.2 NAME NAME 8567 CORAL WAY STE.125 53 STREET ADDRESS STREET ADDRESS **MIAMI FL 33155** 54 CITY-ST-ZIP CITY-ST-ZP

DELETE

attachment with an address

61 TITLE

62 NAME

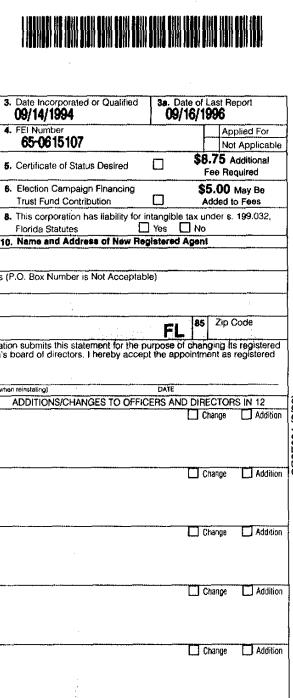
6.3 STREET ADDRESS

h this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the empirical annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that

eiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

6.4 CITY - ST- ZIP

FILED Jan 24 1997 8:00am Secretary of State



Change

365) 887-6327

Addition