## 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

## P95000066650 (9) DOCUMENT #

FALCON SOFTWARE, INC.

Principal Place of Business

Mailing Address

6353 WALLIS ROAD

## FILED Apr 16 1998 8:00am Secretary of State



6353 WALLIS ROAD W. PALM BEACH FL 33413 W. PALM BEACH FL 33413 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/29/1995 2. Principal Place of Busines: 4. FEI Number Applied For 6145 GUN 68-0365262 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Yes Yes Personal Property Tax due June 30. of Current Registered Agent Name and Address of New Registered Agent BEAVERS, REGINALD W 6353 WALLIS ROAD 82 W. PALM BEACH FL 33413 83  $a_{ID}$ 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change Addition Beauers, Reginald W 6145 Gun Club Road BEAVERS, REGINALD W NAME 12 NAME 6353 WALLIS ROAD 1.3 STREET ADDRESS STREET ADDRESS W. PALM BEACH FL 33413 vesi Palm Beach, Fl 1.4 CITY-ST-ZIP CITY-ST-ZIP TATLE DELETE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP ☐ Change Addition TITLE □ DELETE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DFLETE 4.1 TITLE Change Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADORESS City-St-ZiP 4.4 CITY - ST- ZIP DELETE Addition 51 TITLE THILE NAME 5.2 NAME 5.3 STREET ADDRESS 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** 6.4 CITY - ST-ZIP CITY-ST-ZIP

14. 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 13 if changed, or on an attachment with an address.

SIGNATURE:

Reginald Beavers

561-615-6226