

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000085759 (5)

1. Corporation Name

CYBERMEDIA INTERNATIONAL, INC.

Principal Place of Business

2050 CORAL WAY
SUITE 601
MIAMI FL 33145

Mailing Address

2050 CORAL WAY
SUITE 601
MIAMI FL 33145-2682

3. Date Incorporated or Qualified

11/08/1995

3a. Date of Last Report

06/10/1996

2. Principal Place of Business

21 3162 Cambridge Plaza

Suite, Apt. #, etc.

22 2E

City & State

23 Coral Gables, FL

Zip

24 33133

Country

25 USA

2a. Mailing Address

26 P.O. Box 330788

Suite, Apt. #, etc.

27

City & State

28 Coral Gables, FL

Zip

29 33233-0788

Country

30 USA

4. FEI Number

65-0747250

Applied For

5. Certificate of Status Desired

Not Applicable

\$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

GUGLIOTTA, ANABELLA

2050 CORAL WAY

SUITE 601

MIAMI FL 33145

10. Name and Address of New Registered Agent

81 Name

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

3162 Cambridge Plaza

83

Unit 2E

84 City

Coral Gables FL

85 Zip Code

33133

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME GUGLIOTTA, EDMUNDO
STREET ADDRESS 2050 CORAL WAY, SUITE 601
CITY-ST-ZIP MIAMI FL 33145

TITLE VTD ☐ DELETE

NAME GUGLIOTTA, ANABELLA
STREET ADDRESS 2050 CORAL WAY, SUITE 601
CITY-ST-ZIP MIAMI FL 33145

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/97 (305) 441-0414
Date Daytime Phone #

0203382

CP2E034 (9/96)

FILED
May 12 1997 8:00am
Secretary of State

