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

DOCUMENT # P95000092381 (9)

SOUTH	H BEACH SOFTWARE, IN	IC.	` .								
Principal Place of Business Mailing Address								-		NISO ICORR SICOS IR	FD1 1404 100F
1610 PENN. AVENUE #1 MIAMI BEACH FL 33139 1610 PENN. AVENUE #1 MIAMI BEACH FL 33139								DO NOT WR	ITE IN THIS	S SPACE	
								3. Date Incorporated or Qualifie			
								12/05/1995			
2. Principal F	Place of Business	2a. Mai	2a. Mailing Address					4, FEI Number		A	pplied For
21		26	26					65-0632284		N	ot Applicable
Suite, Apt.	. #, e[c.	Suit 27	Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional equired
City & Stal	te	City	City & State					6. Election Campaign Financing		\$5.00	May Be
23		28						Trust Fund Contribution			
Zip	Country	Zip	·		Country			8. This corporation owes or has paid the current year Intangible			
24	25				30			Personal Properly Tax due June 30. K Yes No			
<u> </u>	g. Name and Address of Cu	rrent Registered	I Ageni		81	T .	Namo	10. Name and Address of New	Registere	d Agent	
	DERICK, DAVID				"	["	Nauno				Į
1610 PENN AVENUE					82	9	Street Addre	ss (P.O. Box Number is Not Accep	table)		
#1					83	-					
MIAMI BEACH FL 33139					03	Ί					
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the a					84		City		F	<u> </u>	Code
office or agent. I s	am familiar with, and accept the of	bligations of, Sec	cuble (NO	orida It Regi	Statute	S.		on's board of directors. I hereby ac d when reinstating) ADDITIONS/CHANGES TO OF	DATE		
TITLE	PSTV		DELETE	_	1.1 TITLE					Change	Addition
NAME.	FODERICK, DAVID			- 1 -	1.2 NAME						
STREET ADDRESS	1610 PENN AVENUE #1		1.3 §			T AD(DRESS				
CITY-ST-ZIP	MIAMI BEACH FL 33139	_		1	1.4 CITY - S	S1 - ZI	IP				
TITLE	D		DELETE	2	2.1 TITLE					☐ Change	Addition
NAME	FODERICK, DAVID				2.2 NAME						
STREET ADDRESS	The state of the s			23 STREFT ADDRESS			ORESS				
CITY-ST-ZIP	MIAMI BEACH FL 33139		Total	_	2 4 CITY-	S1 - 7	np .			Пе	
TATLE			DELETE		3.1 TITLE					Change	
NAME DIRECT ADDRESS					3.2 NAME						
STREET ADDRESS					3.3 STREET		i				
CITY-ST-ZIP TITLE	 		DELETE		3.4. CITY- : 4.1 TITLE	SI - 7	ne			Change	Addition
NAME					4 2 NAME]				
STREET ADDRESS				- 1	4.3 STREET		neess				
CHTY-ST-ZIP					4.4 CITY - S		l l				
TIPLE			DELETE		5.1 TITLE	W1 ' £1	"		•	Change	Addition
NAME				- 1	5.2 NAME						
STREET ADDRESS					5.3 STREFT	T ADD	ORESS				
CITY-ST-ZIP					5.4 CITY - S						
TITLE			DELETE		6 1 TITLE	LI			• • • • • • • • • • • • • • • • • • • •	Change	Addition
NAME				ŧ	6 2 NAME					-	
STREET ADDRESS				6	6 3 STREET	r adi:	PRESS				

City-St-ZiP 64 City-St-ZiP 64 City-St-ZiP 64 City-St-ZiP 64 City-St-ZiP 64 City-St-ZiP 64 City-St-ZiP 14. Thereby 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.

FILED

Jan 20 1998 8:00am

Secretary of State