2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2006
Secretary of State

DOCUMENT# P96000007963

Entity Name: WORKPLACE SOFTWARE INC.

Current Principal Place of Business:

48 EAST ROYAL PALM RD
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

48 EAST ROYAL PALM RD
BOCA RATON, FL 33432 US

New Mailing Address:

FEI Number: 65-0653328 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRAMNICK, HINDA R
48 EAST ROYAL PALM RD
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BRAMNICK, HINDA R MS.
Address: 48 EAST ROAYL PALM RD
City-St-Zip: BOCA RATON, FL

Title: T ( ) Delete
Name: BRAMNICK, ARNOLD
Address: 7659 NEWPORT TERRACE
City-St-Zip: BOCA RATON, FL 33433

Title: DIR ( ) Delete
Name: BRAMNICK, STANLEY RABBI
Address: 804 EASTLAWN DRIVE
City-St-Zip: TEANECK, NJ 07666 US

Title: DIR ( ) Delete
Name: BRAMNICK, ELLIOT MR.
Address: 16 BEAR BROOK LANE
City-St-Zip: LIVINGSTON, NJ US

Title: DIR ( ) Delete
Name: BRAMNICK, SHIRA MS
Address: 7659 NEWPORT TERRACE
City-St-Zip: BOCA RATON, FL 33433 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DIR ( ) Change (X) Addition
Name: BRAMNICK, JOSHUA MR
Address: 7659 NEWPORT TERRACE
City-St-Zip: BOCA RATON, FL 33433 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARNOLD BRAMNICK T 01/07/2006

Electronic Signature of Signing Officer or Director Date