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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000012331 (0)

EDUWARE, INC.



97 JUL 31 AM 8: 48

SECREWAY OF STATE TALLAHASSEE FLORIDA

Principal Place of Business Mailing Address				// (
350 WEST CAMINO GARDENS BLVD. 350 WEST C SUITE 303 SUITE 303 BOCA RATON FL 33432 BOCA RATOI					
				3. Date Incorporated or Qualified 3a. Date of Last Rep 02/08/1996	ort
2. Principal Place of Business 2a. Mailing Address				4. FEI Number Appli	ed For
26 Suite, Apt. #, etc. Suite, Apt. #, etc.					pplicable
27 Solie, Apr. #, etc.				5. Certificate of Status Desired See Regul	
City & State City & State				6. Election Campaign Financing \$5.00 M	
28				Trust Fund Contribution Added to I	
Zip* Country	Zip	Country		8. This corporation has liability for intangible tax under s. 19	9.032,
24 25	29	30		Florida Statutes Yes No	
9, Name and Address of Cur	rent Registered Agent		81 Name	10. Name and Address of New Registered Agent	
STREET, BRIAN 350 West Camino Gardens Blvd.			DI Name	nie ·	
SUITE 303			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
BOCA RATON FL 33432		ŀ	83	7-89 10-414	
DOOM INVIORED COME					•
			B4 City	FL 85 Zip Con	ie
11. Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Stragent. I am familiar with, and accept the ob-	502 and 607.1508, Florida Statu ate of Florida Such change was ligations of Section 607.0505, F	tes, the ab authorized lorida Statu	ove-named of by the corportes	corporation submits this statement for the purpose of changing its recoration's board of directors. I hereby accept the appointment as rec	gistered
SIGNATURE		o ma o tato			
Signature, lyped or printed name of registered		1F.: Registered	Agent signature re	equired when reinstating) DATE	
	OFFICERS AND DIRECTORS			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	
TITLE P	DELETE 1		E	· L_ Change {	_ Addition දි
STREET ADDRESS! YELD n.w. 27 aux.		ı	1.2 NAME		2
Bora Ration Fl. 33434			EET ADDRESS		ַנָן
TITLE	DELETE	2.1 TITU	r-ST-ZIP	☐ Change	Addition
NAME	221				-8
STREET ADDRESS			2 NAME 0000022592208 3 STREET ADDRESS -08/06/9701055011		1
CITY-ST-ZIP	■		Y-ST-ZIP	****165.00 ****165.	00
TITLE	☐ DELETE 3.		E	☐ Change	Addition
NAME		3.2 NAA	1F		
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NAME	-	5.2 NAN		Onlings	_ , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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CITY-ST-ZIP			-ST-ZIP		
TITLE	☐ DELETE	6.1 TITL		,c	Addition
NAME		6.2 NAN	hE		
STREET ADDRESS	١.	6.3 STR	EET ADDRESS		1
CITY-ST-ZIP		6.4 CITY	-ST-ZIP		
14. I do hereby certify that the information supp	ied with this fling does not quali	fy for the e	xemption sta	ated in Section 119.07(3)(i), Florida Statutes	

information indicated on this annual report or suppliers I am an officer or director of the corporation of the appears in Block 12 or Block 13 if changed or or tran shreport is true and accurate and that my signature shall have the same legal efficiency de under out; that stree empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name with an address.