## 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 # P9600013039 (8)

INTERNATIONAL SOFTWARE SYSTEMS, INC.

Principal Place of Business

Mailing Address

8040 SW 105 COURT MIAMI FL 33165

3040 SW 105 COURT MIAMI FL 33165-2744

## FILED Feb 10 1997 8:00am Secretary of State



					02/12/1996	M/A	
2. Principal Place of Business		2a, Mailing Addre	2a, Mailing Address		4. FEI Number	· · · · · · · · · · · · · · · · · · ·	Applied For
21		26			55-0644524		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #. etc.		5. Certificate of Status Desired	Desired S8.75 Additional Fee Required		
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country	<i>f</i>	8. This corporation has liability for intangible tax under s. 199.032,		
24	25	29	30		Florida Statutes		
<del></del> -	9. Name and Address of Cur	rent Registered Agent		T	10. Name and Address of New Reg	jistered Agent	
	INON, DAVID		81	Name			
3040 SW 105 COURT MIAMI FL 33165				82 Street Address (P.O. Box Number is Not Acceptable)			
			83		•		
			9.4	City		<b> 85</b> Zi	ip Code
			04	Ully	•	FL 83 2	p Code
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florid	a Statutes, the abov	e-named corp	poration submits this statement for the pr	urpose of changing	its registered
office or i	registered agent, or both, in the St am familiar with, and accept the ob	ale of Florida. Such chang digations of, Section 607 (	ge was authorized by 1505: Florida Statute	y the corpora s.	tion's board of directors. I hereby accep	t the appointment a	as registored
	, , , , , , , , , , , , , , , , , , , ,						
SIGNATURE	Signature, typed or printed name of registered	agent and title trappasable	(NOTE Registered Age	ent signature requi	reo wher reinstating)		
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	ORS IN 12
TITLE	PD	□ DEL	ETE 1.1 7HLE			☐ Chang	e Addition
NAME	CANNON, DAVID		1.2 NAME				
STREET ADDRESS	3040 SW 105 COURT		1.3 STREET	T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33165		1.4 CITY- 5	*			
TITLE		DEL				Change	e Addition
NAME	Ì		2.2 NAM[			_	
STREET ADDRESS				I AUDRESS	•		
CITY-ST-ZIP			2 4 CilY-				
TITLE		DEL		01-211		Chang	e Addition
NAME		_	3.2 NAME			_ •	_
STREET ADDRESS	)		1	I ADDRESS			Ì
CITY-ST-ZIP			3.4 CITY-				
TITLE		Doro		91:77		Change	e Addition
NAME			4.2 NAME				
STREET ADDRESS				ADDRESS			
				į.			l
CITY-ST-ZIP TITLE		DE1	44 CITY - S ETE 5.1 TITLE	oi - Alt.		Chang	e Addition
						L. Grang	, Li Addition
NAME			5.2 NAME	LIBBOYCA			
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP		□ DEL	5.4.011Y-5	S1-ZIP		Change	e Addition
TITLE		☐ DEL	1	\		criangi	a ⊢ Muolilo/I
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET				[
CITY-ST-ZIP			6.4 CHY - S	S1 - 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 logal 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 an attachment with an address.

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7/2/67

(35) 224 0569