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

NO 14 A A GI HEN

**PROFIT CORPORATION** ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham.

Secretary of State DIVISION OF CORPORATIONS

P96000038594 (3) DOCUMENT #

## BORIKEN SOFTWARE TECHNOLOGIES INC.

Principal Place of Business

Mailing Address

## **FILED** Jun 09 1997 8:00am Secretary of State



626 TERRACE COVE WAY ORLANDO FL 32626				626 TERRACE COVE WAY ORLANDO FL 32828-9063									
								-	3. Date Incorporated or Qualified 04/30/1996	3a.	Date of Last I	Raport	
2. Principal Place of Business				2a. Mailing Address					4. FEI Number		A	pplied For	
21				26					59-337474	<b>7</b> :	N	lot Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired	Þ	\$8.75 Additional Fee Required		
City & State				Cily & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Σip	Country			Zip Cou			lry		8. This corporation has liability for intangible tax under s. 199,032,				
24				29 30					Florida Statutes X Yes No				
· · · · · · · · · · · · · · · · · · ·		and Address of Cur	rent Regis	tered Agent			·	1	0. Name and Address of New F	egister	ed Agent		
	era, jose					B1	Name					ļ	
626 TERRACE COVE WAY						82 Street Addre		Address	(P.O. Box Number is Not Accepta	able)			
ORLANDO FL 32828				,									
÷:					ļ	83							
:						84	City			F	'L	Code	
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 Statutos.													
SIGNATURE Signature, typind or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling)  DATE													
12.		OFFICERS	AND DIREC		13.				ADDITIONS/CHANGES TO OFF	ICERS A	ND DIRECTO	RS IN 12	
TITLE	DP	<u> </u>		DELETE	1.1 717	ΙLΕ					Change	Addition	
NAME	RIVERA, J				1.2 NA	ME	i						
STREET ADDRESS						1.3 STREET ADDRESS						ŀ	
CITY - ST - ZIP		) FL 32828			1.4 CI	TY-S	1 - ZIP						
TITLE	DV			DELETE	2.1 111	LE					Change	Addition	
NAME		Z, MARIA A			2.2 NA		ł						
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TITLE				₩ DELETE	6.1 TIT		ļ				Change	Addition	
NAME					6.2 NA								
STREET ADDRESS							ADDRESS						
City-St-ZiP	ov certify that	the information supr	alied with th	is filina dose not avali	fy for the			tated in t	Section 119.07(3)(i), Florida Statut	00 16 11	hot portificable	Ltho	
information	in indicated o fficer <b>o</b> r direc	in this annual report ( itor of the corporation	or supplem For the rece	eolal annual report is t	true and a vered to e	COLL	rate and	that my	signature shall have the same log required by Chapter 607, Florida	al offect	Lac if made un	dor oath: that	