SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000039005 (9) DOCUMENT #

DESKTOP APPLICATIONS, INC.

APPROVED AND

1997 SEP 16 AH 9: 18

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address												11 66(29 111)	n navni na vni na	
5201 NW 62ND COURT 5201 NW 62ND COURT GAINESVILLE FL 32653 GAINESVILLE FL 32653														
										DO I	DO NOT WRITE IN THIS SPACE			
									3. Date Incorporated or 05/01/1996	Qualified	1	ite of Last R	eport	
2. Principal Place of Business					2a. Maifing Address					4. FEI Number			—	oplied For
21			26						59-337	<i>t</i> 610.			ot Applicable	
22	Sulte, Apt. #, etc.			27	Suite, Apt. #, etc. 27					5. Certificate of Status I	Desired		\$8.75 A	
23	City & Stat	y & State			City & State					6. Election Campaign F Trust Fund Contribut	-		\$5.00 bebbA	
24	Zip	Country 7ip Co				intry	79 8. This corporation owes or has paid the current year Intan Personal Property Tax due June 30.					_ `		
24 25 29 30 30 30 30 30 30 30 30 30 30 30 30 30										10. Name and Address				
BERKELHAMMER, ALAN D								Name		10.				
5001 NW 60ND COLIDT							82	Stroot	Addre	ee (P.O. Boy Number is N	ot Acceptab	la)		
GAINESVILLE FL 32653							300007	Street Address (P.O. Box Number is Not Acceptable)						
							83							j
							84	City				FL	85 Zip	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 re- 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, and accept the obligations of Section 607.0505. Florida Statutes.												s registered registered		
agent. I am raminar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE														
		Signature, typed	or printed name of registe				d Age	int signature	required	d when reinstating)		DATE		
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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 on an attachment with an address.

Pres.

(6)

Desktop Applications, Inc.

Desktop Applications, Inc. 5201 NW 62nd Court Gainesville, FL 32653

Phone: (352) 373-8867

September 12, 1997

Florida Dept. of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

Enclosed is our CORPORATION ANNUAL REPORT for 1997.

We respectfully ask that you waive the \$385.00 late filing fee since we did not receive the first notice of this form.

This corporation was founded in 1996 and therefore this is the first year we have been required to file this report. I have placed the due date for the 1998 filing on our calendar so that we may call if we do not receive next year's form and file timely in 1998.

Enclosed is our check for \$165.00.

Thanking you in advance.

Sincerely,

Alan Berkelhammer, President