

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000057306

**FILED**  
**Apr 23, 2004**  
**Secretary of State**

**Entity Name:** SOFTWARE AGENTS CORP.

**Current Principal Place of Business:**

18672 OCEAN MIST DR33  
BOCA RATON, FL 33498 US

**New Principal Place of Business:**

18672 OCEAN MIST DR  
BOCA RATON, FL 33498 US

**Current Mailing Address:**

PO BOX 812644  
BOCA RATON, FL 33481 US

**New Mailing Address:**

18672 OCEAN MIST DR  
BOCA RATON, FL 33498 US

**FEI Number:** 51-0311730

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GONZALEZ, CARLOS  
18672 OCEAN MIST DR  
BOCA RATON, FL 33498 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: PSD ( ) Delete  
Name: GONZALEZ, CARLOS  
Address: 18672 OCEAN MIST DR  
City-St-Zip: BOCA RATON, FL 33498

Title: VPTD ( ) Delete  
Name: GONZALEZ, STEPHANIE  
Address: 18672 OCEAN MIST DR  
City-St-Zip: BOCA RATON, FL 33498

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARLOS A. GONZALEZ

PSD

04/23/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date