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

PROFIT
CORPORATION
ANNUAL REPORT
1998

DOCUMENT #
1, Corporation Name
INDUSTRIAL SOFTWA



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600061666 (9)

FILED Jan 30 1998 8:00am Secretary of State

	TRIAL SOFTWARE SOLUTIO	NS, INC.	,		
Principal Plac	ce of Business	Mailing Address	,		1181 01818 B3140 01130 8141 1001
1917 ARVIS CIRCLE NO CLEARWATER FL 34624-6456		1917 ARVIS CIRCLE NO CLEARWATER FL 34624-6456		DO NOT WRITE IN THIS	S SPACE
				3. Date Incorporated or Qualified	
				07/22/1996	
2. Principal l	Place of Business	2a, Mailing Address		4, FEI Number	Applied For
21		26		59-3391659	Not Applicable
Suite, Apt	. #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & Sta	ite	City & State		6. Election Campaign Financing	\$5.00 May Be
23	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	├ - ¬ '	8. This corporation owes or has paid the c	urrent year intangible Yes A No
24	25 2 Name and Address of Curren	29 29 Agent	[30]	Personal Property Tax due June 30. 10. Name and Address of New Registered	
		r rodiatoran wharir	81 Name	10. Henry Mile Degrees of Hote Hollierete.	- ·-g=····
	RRY, KATHLEEN				
1917 ARVIS CIRCLE NO			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
CL	EARWATER FL 34824-8458		83		
			84 City	F	85 Zip Code
44 Pureuani	to the provisions of Sections 607.050	2 and 607 1508. Florida Stat	Jules, the above-named co	rogration submits this statement for the purpose	of changing its registered
office or	registered agent, or both, in the State	of Frida. Such change wa	authorized by the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	ppointment as registered
agent. L	am familiar with, and accept the obliga				100'
SIGNATURE	Symattre, typed or printed name of registered age		MICEN ICCO		[90
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	W	
NAME	•				L Change Addition
	I TERRY, KATHLEEN		1.2 NAME		L Change
STREET ADDRESS	TERRY, KATHLEEN 1917 ARVIS CIRCLE NO		1.2 NAME 1.3 Street address		∟ change ∟ Addition
STREET ADDRESS	1917 ARVIS CIRCLE NO	ı	1.3 STREET ADDRESS		∟ Change ∟ Addition
CITY-ST-ZIP		DELETE			Change Addition
CITY-ST-ZIP TITLE	1917 ARVIS CIRCLE NO CLEARWATER FL 34624-6456 D		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		·
CITY-ST-ZIP TITLE NAME	1917 ARVIS CIRCLE NO CLEARWATER FL 34624-6456 D TERRY, JOHN		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE		·
CITY-ST-ZIP TITLE NAME STREET ADDRESS	1917 ARVIS CIRCLE NO CLEARWATER FL 34624-6456 D TERRY, JOHN 1917 ARVIS CIRCLE NO	DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		·
CITY-ST-ZIP TITLE NAME	1917 ARVIS CIRCLE NO CLEARWATER FL 34624-6456 D TERRY, JOHN	DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		·
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4. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes: I further certify that it in Information indicated on this annual report or supplied annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or an attachment with an address.

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1/12/98 813-530-0518