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Apr 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000070391 (3)

1. Corporation Name

CAICE SOFTWARE CORPORATION

CAICE

Principal Place of Business

Mailing Address

2507 BRIMHOLLOW DRIVE
VALRICO FL 33594

2507 BRIMHOLLOW DRIVE
VALRICO FL 33594-5744



2. Principal Place of Business	2a. Mailing Address
21 410 WARE BLVD Suite, Apt #, etc.	26 410 WARE BLVD Suite, Apt #, etc.
22 JUNE 2000 City & State	27 SUITE # 2000 City & State
23 TAMPA, FL Zip	28 TAMPA, FL Zip
24 33619 Country	29 33619 Country
25 HILLSBOROUGH	30 HILLSBOROUGH

3. Date Incorporated or Qualified 08/22/1996	3a. Date of Last Report
4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

AKMAN, ALAN G
2507 BRIMHOLLOW DRIVE
VALRICO FL 33594

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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 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 Statutes.

SIGNATURE G. X. AKMAN GISELLE X. AKMAN PRESIDENT DATE 3/17/97
(Signature typed to printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	CEO
NAME	AKMAN, ALAN G	1.2 NAME	
STREET ADDRESS	2507 BRIMHOLLOW DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	VALRICO FL 33594	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	PRESIDENT
NAME	AKMAN, GISELLE X	2.2 NAME	
STREET ADDRESS	2507 BRIMHOLLOW DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	VALRICO FL 33594	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-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 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 on an attachment with an address.

SIGNATURE: G. X. AKMAN GISELLE X. AKMAN PRESIDENT DATE 3-17-97 DAYTIME PHONE # 813-620-1444
(Signature typed to printed name of signing officer or director)

CR2E034 (9/96)