FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

2a. Mailing Address

Suite, Apt. #, etc.

26

27

PROFIT CORPORATION ANNUAL REPORT

1998

2. Principal Place of Business

Suite, Apt. #, etc.

Pr



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000086554 (8)

PORTABLE SOFTWARE SOLUTIONS, INC.

FILED Feb 26 1998 8:00am Secretary of State

Applied For

\$8.75 Additional

Fee Required

Not Applicable

incipal Place of Business	Mailing Address	. sammade sie samme mitt dater aufer aufer burgt bille
D16-C E JOHN SIMS PKWY ICEVILLE FL 32578	1016C E JOHN SIMS PKWY NICEVILLE FL 32578	
S	US	DO NOT WRITE IN THIS SPACE
		3. Date Incorporated or Qualified 10/21/1996

4. FEI Number

59-3408518

5. Certificate of Status Desired

City & State		City & State		8 Floring O		
23	в	28	-	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Ontry	8. This corporation owes or has paid the current war Intangible		
24	25	29	30	Personal Property Tax due June 30 Ves No		
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent		
AM	AMERICAN INFORMATION SERVICES, INC. 81 Name					
	E S.E. 3RD AVE.		82 Stree	et Address (P.O. Box Number is Not Acceptable)		
	H FLOOR		52 0.100	A Address (F.O. Box Number is Not Acceptable)		
	MI FL 33131		83			
1	,		B4 City			
	•		B4 City	FL 85 Zip Code		
44 Qureuant	to the provisions of Sections 607 0502	and 607.1508, Florida \$ta	atutes, theove-name	d correction to the transfer of		
office or I	registered agent, or both, in the State of	of Florida, Such change w	as authori; by the co	o corporation submits this statement for the purpose of changing its registered progration's board of directors. I hereby accept the appointment as registered		
agent. I a	registered agent, or born, in the state come familiar with, and accept the obligat	ions or, section 607.0303	, Florida Givo.			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable	(NOTE: RegistAgent signatur	re required whon reinstating)		
12.	OFFICERS AND		1:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	DELETE	1.E	Change Addition		
NAME	KENNY, JOHN		1.JE	ADDRION		
STREET ADDRESS	52-54 SOUTHWAKR ST		1.ET ADDRESS	52-54 BOUTHWATK.St.		
	LONDON EN		1, -ST-ZIP	0× 0.1 000 1100 11 17. 24.		
CITY-ST-ZIP	VPST	DELETE	2	Change Addition		
	MAGUIRE, BRYAN J	_	2£	☐ Change ☐ Addition		
NAME	52-54 SOUTHWARK ST		2:ET ADDRESS	•		
STREET ADDRESS	LONDON EN		2/-ST-ZIP			
CITY-ST-ZIP	LONDON EN	DELETE	₫			
TITLE			Æ	☐ Change ☐ Addition		
NAME			SET ADDRESS			
STREET ADDRESS			Y-SY-ZIP			
CITY-ST-ZIP		DELETE	E E			
TITLE		(December 1	AE .	☐ Change ☐ Addition		
NAME	!		ET ADDRESS			
STREET ADDRESS			1			
CITY-ST-ZIP		DELETE	-ST-ZIP			
TITLE		L. DELETE	ME	☐ Change ☐ Addition		
NAME	Í		1	200002442322		
STREET ADDRESS			REET ADDRESS	-02/27/9801014015		
CiTY-ST-ZIP		T SUFFE	TY-ST-ZIP	***8.75		
TITLE		DELETE	1	Change Addition		
NAME			4ME	20000244232 Change Addition -02/27/9801014014		
STREET ADDRESS			'AEET ADDRESS	***150.00 2-26		
1	1		מול בס עדי	**************************************		

14. I hereby certify that the information supplied with this filing does not qualify formption 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 accord 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 ethis 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.