

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 16 1997 8:00am  
Secretary of State

DOCUMENT # P96000088930 (8)

1. Corporation Name  
SRI SOFTWARE SOLUTIONS INC.



Principal Place of Business

6425 COWPEN RD  
APT #P-201  
MIAMI LAKES FL 33014

Mailing Address

6425 COWPEN RD  
APT #P-201  
MIAMI LAKES FL 33014-6859

2. Principal Place of Business

21 6180 NORTH.W. 173<sup>rd</sup> STREET  
Suite, Apt. #, etc.

22 #518, MIAMI LAKES, FL  
City & State

23 33015 U.S.A.  
Zip Country

24  
25

2a. Mailing Address

26 6180 NORTH.W. 173<sup>rd</sup> ST.  
Suite, Apt. #, etc.

27 #518, MIAMI LAKES, FL  
City & State

28 33015 U.S.A.  
Zip Country

29  
30

9. Name and Address of Current Registered Agent

SUNKARA, SRIDHAR  
6425 COWPEN RD  
APT #P-201  
MIAMI LAKES FL 33014

3. Date Incorporated or Qualified  
10/29/1996

3a. Date of Last Report

4. FEI Number  
65-0705955

Applied For  
☒ Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name SUNKARA, SRIDHAR  
82 Street Address (P.O. Box Number is Not Acceptable)  
6180 NORTH.W. 173<sup>rd</sup> ST  
83 APT # 518  
84 City MIAMI LAKES FL 85 Zip Code 33015

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

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT  
NAME SRIDHAR SUNKARA  
STREET ADDRESS 6180 NORTH WEST 173<sup>rd</sup> ST, # 518  
CITY-ST-ZIP MIAMI LAKES, FL - 33015

TITLE  
NAME  
STREET ADDRESS  
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STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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:

Sridhar Sunkara (SRIDHAR SUNKARA)

04/27/97

305-362-9909

CR2E034 (9/96)