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PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P96000095282 (5)**

1. Corporation Name
INFORMATICA, INC.

Principal Place of Business	Mailing Address
C/O 960 SUNTRUST INTERNATIONAL CENTER 1 SE THIRD AVENUE MIAMI FL 33131	C/O 960 SUNTRUST INTERNATIONAL CENTER 1 SE THIRD AVENUE MIAMI FL 33131-1700

2. Principal Place of Business	2a. Mailing Address
21 1 S.E. 3rd Ave	26 1 S.E. 3rd Ave
Suite, Apt. #, etc. 22 Ste. 960	Suite, Apt. #, etc. 27 Ste 960
City & State 23 Miami Florida	City & State 28 Miami Florida
Zip / Country 24 33131 / 25 USA	Zip / Country 29 33131 / 30 USA

3. Date Incorporated or Qualified: **11/21/1996**
3a. Date of Last Report:

4. FEI Number: 65-0712258 ☐ 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

9. Name and Address of Current Registered Agent

GONZALEZ, IRVING J
C/O 960 SUNTRUST INTERNATIONAL CENTER
1 SE THIRD AVENUE
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name: Leslie Alan Rozencwaig
82 Street Address (P.O. Box Number is Not Acceptable): 1 S.E. 3rd Ave
83 Ste 960
84 City: Miami FL 85 Zip Code: 33131

11. Pursuant to the provisions of Section(s) 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: Leslie Alan Rozencwaig 2/24/97
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☒ Addition Secretary Leslie Alan Rozencwaig 1 S.E. 3rd Ave Ste 960 Miami FL 33131
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition PRESIDENT ROLANDO RICCIO 1 S.E. 3rd Ave. Ste 960 MIAMI FLA 33131
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/96)

FL Dept 150.00

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: Rolando Riccio 3/3/97