<u> EU</u>	E NOW: FILING FEE A	FTER MAY 1ST IS	\$550.00	FILED	_
PROFIT CORPORATION				99 JUL 2 2 PH 2: 53	
	REPORT		ny of Sia		<u> </u>
DOCUMENT # P96 000 096877 Vok				S TUARY OF STATE FOR DATE OF STATE	
1. Corporation	on Name / 7 🗸	-			=-
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1 1	ce of Business	Mailing Address		7	=:
1832 SW 105 AVENUE DAVIE, FL 33324				DO NOT WRITE IN THE	S SPACE
UNU.	10,76 335	24		3. Date Incorporated or Qualifed	=:
<u> </u>	Place of Business	2a. Mailing Address		4, FEI Number (0.5 - 0.7/6699	Applied For State
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	Eas Paguired 94 13
City & Sta	le	City & State		Election Cempaign Financing Trust Fund Contribution	\$5.00 May Be
23 Zip 24	Country	Zip	Country	This corporation owes the current year in Personal Property Tax.	niaggible No
	9. Name and Address of Curren		81 Name	10. Name and Address of New Registered	1 Agent
1832 SW 105 AUENUE BZ Street Address (P.O. Box Number is Not Acceptable)					
DAVIE, FL 33324			83		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Floride 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 Floride, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
office or i	no the provisions of Sections 607.050 registered agent, or both, in the State	z and 607.1506, Florida Statute of Florida, Such change was au	thorized by the corporati	on's board of directors. I hereby accept the appo	intment as registered
mgent. i a	im familiar with, and accept the obliga-	tions of, Section 607.0505, Flori	ida Statutes.	•	į.
SIGNATURE	Tigneture, typed or proteid name of registered agen	it and this if applicable (NOTE:	Registered Agent signature require	of when remalating) DATE	
mgent. I a	Threather, typed or provided name of reportered aper OFFICERS AN	Hand the Happicable (NOTE: D DIRECTORS	Regulared Agent stoneture require 13. 1.1 TITLE	of when remembers) BAYE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 7, 1999

CUSTOM CRAFTED SOFTWARE, INCORPORATED 1832 SW 105 AVENUE DAVIE, FL 33324

SUBJECT: CUSTOM CRAFTED SOFTWARE, INCORPORATED

Ref. Number: P96000096877

Please be advised, we have received your annual report for the above corporation and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following:

The above referenced corporation was administratively dissolved on Ocotber 16, 1998 for failure to file the 1998 annual report. Our records indicate the report was returned to our office by the Post Office. As a result, we can waive the \$600.00 reinstatement fee. The \$150.00 annual report fee for 1998 is required to make the corporation current and active.

After the corrections have been made, please return the document and a copy of this letter to my personal and confidential attention at the address below within 30 days from the date of this letter.

If you have any questions concerning the filing of your document, please call (850) 487-6059.

Sean Toner Senior Section Administrator

Letter Number: 999A00035204