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FILED
Apr 02 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000099781 (2)

1. Corporation Name

SOFTACCESS, CORPORATION

Principal Place of Business

1039 W PALMETTO PARK RD
BOCA RATON FL 33486

Mailing Address

1039 W PALMETTO PARK RD
BOCA RATON FL 33486-3417



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

12/09/1996

3a. Date of Last Report

4. FEI Number

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

YAP, TROY A
1039 W PALMETTO PARK ROAD
BOCA-RATON FL 33486

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

10. Name and Address of New Registered Agent

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PCEO ☐ DELETE
NAME YAP, TROY A
STREET ADDRESS 1039 W PALMETTO PARK RD
CITY-ST-ZIP BOCA RATON FL 33486

TITLE D ☒ DELETE
NAME POTTS, STEVE O-MANGE
STREET ADDRESS 1039 W PALMETTO PARK RD
CITY-ST-ZIP BOCA RATON FL 33486

TITLE D ☐ DELETE
NAME CLINE, TODD P-MANGE
STREET ADDRESS 1039 W PALMETTO PARK RD
CITY-ST-ZIP BOCA RATON FL 33486

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT / CEO ☒ Change ☐ Addition
1.2 NAME TROY ANTHONY YAP
1.3 STREET ADDRESS 1039 W. PALMETTO PK. RD.
1.4 CITY-ST-ZIP BOCA RATON, FL 33486

2.1 TITLE PRODUCTION/OPERATION EXEC. ☒ Change ☐ Addition
2.2 NAME TODD CLINE
2.3 STREET ADDRESS 401 E. ACRE DRIVE
2.4 CITY-ST-ZIP PLANTATION, FL 33317

3.1 TITLE MARKETING OFFICER ☐ Change ☒ Addition
3.2 NAME GREG M. OTTO
3.3 STREET ADDRESS 712 FORSYTH ST
3.4 CITY-ST-ZIP BOCA RATON, FL 33487

4.1 TITLE CEO ☐ Change ☒ Addition
4.2 NAME STEVEN POTTS
4.3 STREET ADDRESS 1039 W. PALMETTO PK. RD
4.4 CITY-ST-ZIP BOCA RATON, FL 33486

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

SIGNATURE

3/10/97

(561) 391-6748

CR2E034 (9/96)