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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000102079 (6)

GALILEO BUSINESS SOFTWARE, INC.

FILED Apr 27 1998 8:00am Secretary of State

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					-{				
Principal Place of Business Mailing Address									
C/O JORGE E. OTERO 75 VALENCIA AVE 4TH FLOOR CORAL GABLES FL 33134		75 VALENCIA AVE 4TH	C/O JORGE E. OTERO 75 VALENCIA AVE 4TH FLOOR CORAL GABLES FL 33134			DO NOT WRITE IN THIS	SPACE		
COMPL SADE	EO FE 55154	COMME CADELO I E VO	COMME SABELS TE SSIDA			3. Date Incorporated or Qualified			
						12/17/1996			
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	App	lied For	
21		26	26			90-1804563	Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	dditional	
22		27	27			5. Certificate of Status Desired	Fee Req	uired	
City & State	9	City & State	City & State			6. Election Campaign Financing	\$5.00 k	Лау Ве	
23		28				Trust Fund Contribution	Added to	Fees	
Zip	Country	Zip	<u> </u>	intry		8. This corporation owes or has paid the cur			
24	[25]	29	30	,		Personal Property Tax due June 30. 10. Name and Address of New Registered		No	
	e. Name and Address of Curr	ent riegistered Agent		81	Name	10. Name and Address of New Registered	- Agorit		
OTERO, MULLIN & TOMLIN, P.A.				of Marie					
	VALENCIA AVE		82 Street Ad			dress (P.O. Box Number is Not Acceptable)			
	ITE 400			83					
CO	RAL GABLES FL 33134								
				84	City	FL	85 Zip C	ode	
44 Dureyant	to the provisions of Sactions 607.0	602 and 607 1508 Florida Stat	lutes the el	boye	-named co		changing its	registered	
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 reinstaling) DATE									
12. OFFICERS AND DIRECTORS 13.					it digitals to	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS	IN 12	
TITLE			1.1.70	TLE				Addition	
NAME	CAUDET, RAMON								
STREET ADDRESS	800 DOUGLAS RD SUITE 5	50			ADDRESS			}	
CITY-ST-ZIP	CORAL GABLES FL 33134				T-ZIP				
TITLE	DELETE 2.17					Change	Addition		
NAME		221		2.2 NAME					
STREET ADDRESS			2.3 \$1	2.3 STREET ADDRESS					
CITY-ST-ZIP				ITY-S	ST-ZIP				
TITLE	DELETE 3.11			TLE			Change	Addition	
NAME			3.2 N	AME	- 1				
STREET ADORESS			3.3 \$1	TREET.	ADDRESS				
CITY-ST-ZIP			3.4. C	iTY-S	ST-ZIP				
THLE		☐ DELETE	4.1 TI	TLE			Change	Addition	
NAME			4. 2 N	IAME				1	
STREET ADDRESS			4.3 S1	TREET .	ADDRESS				
CITY-ST-ZIP			4.4 CI	TY-\$1	T- Z IP				
TITLE		DELETE	5.1 7	TLE		·· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME			5.2 N/	AME					
STREET ADDRESS			5.3 \$1	TREET .	ADDRESS				
CITY - ST - ZIP			5.4 CI	TY - \$1	r-ZIP				
TITLE		☐ DELETE	6.1 TI	TLE		····	Change	Addition	
NAME			62 N	AME					
STREET ADDRESS			63 \$1	TREET	ADORESS				
				1Y-S1					
4.4 I horoby c	sertify that the information symplical	with this files door not qualify	for the ave	nmnt	hotete ani	in Section 119 07/3\/i\ Florida Statutes further ce	rtifu that the i	ntormetion	

indicated on this annual report or supplied with this minig does not quality 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 eath; 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 by an anatoment with an address.

BAMOU PAUDET

-98 (305) 4416462