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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000039239 (3)

INTERNATIONAL CORPORATE SOFTWARE, INC. Principal Place of Business Mailing Address 4021 GULF SHORE BLVD NORTH STE 1701 4021 GULF SHORE BLVD NORTH STE 1701 NAPLES FL 34103 NAPLES FL 34103 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/30/1997 2a. Mailing Address 2. Principal Place of Business Applied For 59. 3479998 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent KELLY, CHARLES JR 2640 GOLDEN GATE PKWY STE 315 82 Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 33942 83 84 85 Zip Code 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 little if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE PRESIDENT 1.1 TITLE RICHARD J BORCHERS 1.2 NAME 2E034 4021 Gulf Shore Blvd North STREET ADDRESS 1.3 STREET ADDRESS Naples 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE 2.1 TITLE Change Treasuren JANE E BOR CHERS NAME 22 NAME 4021 Guif Shore Blvd North #176 STREET ADDRESS 2.3 STREET ADDRESS . . 34La3 City-St-ZiP 2.4 City-St-ZiP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 4.1 TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME

6.3 STREET ADDRESS

14. I 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): true and accurate and that officer or director of the corporation or the receiver of the empowered to execute this re Block 12 or Block 13 if changed or or ar allactioner with an address.

STREET ADDRESS

3.2690

oor is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

1403-7204

FILED

Mar 24 1998 8:00am

Secretary of State