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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 11 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700065304 (2)

PREMIER SOFTWARE, INC.

Principal Place of Business		Mailing Address		I BORNINGN DIN IBRID DOGIN OUTIN OUT	1983 83108 81111 88111 WISE 1881
21121 SOUTHWEST 85 AVENUE		21121 SOUTHWEST 85 AVENUE			
SUITE 215		SUITE 215		DO NOT WRITE IN THIS SPACE	
MIAMI FL 3316	89	MIAMI FL 33189		3. Date Incorporated or Qualified	
				07/29/1997	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		45-0770864-	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	28 Zip	Country	8. This corporation owes or has paid the o	
24	25	29	30	Personal Property Tax due June 30.	Yes No
<u>***</u>	9. Name and Address of Curre			10. Name and Address of New Registere	d Agent
AMI	ERILAWYER CHARTERED		81 Name	ACC FALCA	
343 ALMERIA AVENUE			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
CORAL GABLES FL 33134			1 618	DO SW 98th PLACE	
			63	- •	
			B4 City, A		85 Zip Code
			MILE	MI F	L 33190
11. Pursuant office or r	to the provisions of Sections 607.05 registered agent, or both, in the Stat	:02 and 607.1508, Florida Statu e of Florida. Such change was	les, the above-named corp authorized by the corporal	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing its registered pointment as registered
agent I a	im familiar with and account the oblin	/) / -	. , , ,		_
SIGNATURE	Signature, lypod or photod name of registrated as	GREG FALCE	E: Registered Agent signature reguli	/998 red when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PTD	DELETE	1.1 TITLE		Change Addition
NAME	FALCO, JOSEPH H		1.2 NAME		
STREET ADDRESS	21121 SOUTHWEST 85 AVE	NUE	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33189		1.4 CITY-ST-ZIP		
TITLE	\$ VD	☐ DELETE	2.1 TITLE		Change Addition
NAME	CALZADILLA, MARCO C JR		2.2 NAME		
STREET ADDRESS	21121 SOUTHWEST 85 AVE	NUE	2.3 STREET ADDRESS	•	
CITY-ST-ZIP	MIAMI FL 33189	Drutte	2.4 CITY-ST-ZIP		Change Addition
, TITLE		☐ DELĒTE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. C/TY-ST-Z/P 4.1 T/TLE		Change Addition
TITLE		[*] pertit			C change T resultion
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 Crty-St-ZIP 5.1 Title		Change Addition
			5.2 NAME		
NAME STREET ADDRESS			5.3 STREET ADDRESS		
1			5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE			3.4 0111-3172#		
4	ĺ	DELETE	6.1 TITLE		Change Addition
NAME		DELETE	6.1 TITLE 6.2 NAME		Change Addition

14. Thereby 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 supplied entail 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 of 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, signature with an address.