2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000032977 1. Entity Name

ON-SITE OFF-SITE SOFTWARE, INC.

Principal Place of Business

1600 SARNO RD. STE. 207 MELBOURNE, FL 32935 Mailing Address

1600 SARNO RD. STE. 207 MELBOURNE, FL 32935

FILED Apr 30, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

02172004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3504385

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ANDERSON, J P 930 S. HARBOR CITY BLVD. STE. 505 MELBOURNE, FL 32901

DO NOT WRITE IN THIS SPACE

SIGNATURE Standture, typed or project name of registered agent and trife if applicable (NOTE Registered Agent signature required when reinstating) DATE						
Signature. typed or printed name of registered agent and talle if applicable (NOTE Flogistered / FILE NOWILL FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financ Trust Fund Contribution				\$5.00 May Be Added to Fees	DAIR	
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YANDURA, BERNARD F 5631 HERONS' LANDING DRIVE ROCKLEDGE, FL 32955	***				
THE NAME STREET ADDRESS C(TY+ST+ZIP	D YANDURA, SUSAN R 5631 HERONS' LANDING DRIVE ROCKLEDGE, FL 32955				[[m][hm]; 44]]44 [44] [64] [44] [4] [4] [4] [4] [4]	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP				IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY - STI- ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						

BBANAAD F.

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept