


FILED
Apr 28, 1999 8:00 am
Secretary of State

04-28-1999 90001 035 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000037117

1. Corporation Name

BUSINESS SOFTWARE APPLICATION INC.

Principal Place of Business 8541 NW SOUTH RIVER DRIVE MEDLEY FL 33166	Mailing Address 8541 NW SOUTH RIVER DRIVE MEDLEY FL 33166
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/23/1998

4. FEI Number

#65-0861333

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional Fee Required6. Election Campaign Financing Trust Fund Contribution ☐**\$5.00** May Be Added to Fees8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

23. City & State

24. Zip Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

28. Zip Country

29

30

9. Name and Address of Current Registered Agent

PUIGNAU, JORGE
2030 NW 91 TERRACE
PEMBROKE PINES FL 33024

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

PD
PUIGNAU, JORGE
230 NW 91 TERRACE
PEMBROKE PINES FL 33024

CITY-ST-ZIP

1.2 NAME ☐ DELETE

VD
VERDAGUER, ROLANDO H
1310 W 46 ST, APT 7
HALEAH FL 33012

CITY-ST-ZIP

1.3 STREET ADDRESS ☐ DELETE

CITY-ST-ZIP

1.4 CITY-ST-ZIP ☐ DELETE

CITY-ST-ZIP

1.5 CITY-ST-ZIP ☐ DELETE

CITY-ST-ZIP

1.6 CITY-ST-ZIP ☐ DELETE

CITY-ST-ZIP

1.7 CITY-ST-ZIP ☐ DELETE

CITY-ST-ZIP

1.8 CITY-ST-ZIP ☐ DELETE

CITY-ST-ZIP

1.9 CITY-ST-ZIP ☐ DELETE

CITY-ST-ZIP

1.10 CITY-ST-ZIP ☐ DELETE

CITY-ST-ZIP

1.11 CITY-ST-ZIP ☐ DELETE

CITY-ST-ZIP

1.12 CITY-ST-ZIP ☐ DELETE

CITY-ST-ZIP

1.13 CITY-ST-ZIP ☐ DELETE

CITY-ST-ZIP

1.14 CITY-ST-ZIP ☐ DELETE

CITY-ST-ZIP

1.15 CITY-ST-ZIP ☐ DELETE

CITY-ST-ZIP

1.16 CITY-ST-ZIP ☐ DELETE

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS / ND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition1.2 NAME ☐ Change ☐ Addition1.3 STREET ADDRESS ☐ Change ☐ Addition1.4 CITY-ST-ZIP ☐ Change ☐ Addition2.1 TITLE ☐ Change ☐ Addition2.2 NAME ☐ Change ☐ Addition2.3 STREET ADDRESS ☐ Change ☐ Addition2.4 CITY-ST-ZIP ☐ Change ☐ Addition3.1 TITLE ☐ Change ☐ Addition3.2 NAME ☐ Change ☐ Addition3.3 STREET ADDRESS ☐ Change ☐ Addition3.4 CITY-ST-ZIP ☐ Change ☐ Addition4.1 TITLE ☐ Change ☐ Addition4.2 NAME ☐ Change ☐ Addition4.3 STREET ADDRESS ☐ Change ☐ Addition4.4 CITY-ST-ZIP ☐ Change ☐ Addition5.1 TITLE ☐ Change ☐ Addition5.2 NAME ☐ Change ☐ Addition5.3 STREET ADDRESS ☐ Change ☐ Addition5.4 CITY-ST-ZIP ☐ Change ☐ Addition6.1 TITLE ☐ Change ☐ Addition6.2 NAME ☐ Change ☐ Addition6.3 STREET ADDRESS ☐ Change ☐ Addition6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 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, with a letter like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2F034 (1/1/98)