PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000102944

1. Corporation Name SOFTWARE 4 YOU, INC. Principal Place of Business Mailing Address 100 N. BISCAYNE BLVD 21ST FLOOR NEW WORLD TOWER MIAMI FL 33132 MIAMI FL 33132 MIAMI FL 33132						DO NOT WRITE IN THIS SPACE	
ţ							3. Date Incorporated or Qualifed
							12/09/1998
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For 65-0880791 Not Applicable
Suite, Apt.	# etc	26	Suite, Apt. #, etc.		-		03-0880/91 Not Applicable \$8.75 Additional
22	. w , e.c.	27	Cuite, Apr. #, etc.				5. Certificate of Status Desired Fee Required
==City & Sta	le		City.& State		_		-6: Election Campaign Financing \$5:00 May 8e
23		28	1		-		Trust Fund Contribution Added to Fees
Zip	Country	- -0	Zip	Counti	гу	···	This corporation owes the current year Intangible
24	25	29	1	30	•		Personal Property Tax.
 	9. Name and Address of Curre		stered Agent	,,			10. Name and Address of New Registered Agent
				8	1	Name	7.04
	R, THOMAS	_		8	-	Ctroot Add	
100 N. BISCAYNE BLVD., 21ST FLOOR					-	Street Addr	ress (P.O. Box Number is Not Acceptable)
	NEW WORLD TOWER						
MIAMI FL 33132					1		
)				8	4	City	FI 85 Zip Code
office or a	registered agent, or both, in the State am familiar with, and accept the oblig	e of Flor ations o	ida. Such change was a f, Section 607.0505, Flo	authorized b orida Statute	y tl	he corporation	poration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered as when reinstating)
12.	OFFICERS A			13.	_		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		☐ DELETE	1.1 TITLE	_	D	D/VP/S ☑ Change ☐ Addition
NAME	BRINKMANN, HANNS-DIRK			1.2 NAME			RINKMANN, HANNS-DIRK
STREET ADDRESS	CD4104162555555555555555555555555555555555555	D-82159	2 MARTINDRIED	1.3 STRE	ET A		RAUNHOFEPSTRASSE 18B
CITY-ST-ZIP	GERMANY			1.4 CITY-			0-82152 MARTINSRIED GERMANY
TITLE	D		DELETE	2.1 TITLE			Change Addition
NAME	VON DER LOCHT, ROY			2.2 NAME			,
	CONTRACTOR TO LOOK AND I	D-82152	MARTINDRIED			ADDRESS	
CITY-ST-ZiP	GERMANY			2.4 CITY			
TILE		=	DELETE	3.1 TITLE			Change Addition
NAME				3.2 NAME		H	OPPE, MICHAEL
STREET ADDRESS							OO N. BISCAYNE BLVD. STE.#2100
CITY-ST-ZIP				3.4. CITY-			IIAMI, FL 33132
TITLE			☐ DELETE	4.1 TITLE		- 2.1	Change Addition
NAME	l		_ 	4. 2 NAME			
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP	1			4.4 CITY-			·
TITLE	 		☐ DELETE	5.1 TITLE		- LIF	Change [] Addition
NAME				5.2 NAME			
STREET ADDRESS	1					ADDRESS	
				5.4 CITY-			
TITLE	 	-	[] DELETE	6.1 TITLE			☐ Change ☐ Addition

CITY-ST-ZIP 14. I hereby certify that the information subtlied why 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 subtle frequenty 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 frequency 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 chart high pipel with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

RECMichael Hoppe, President -- 2/9/99 OF SIGNING OFFICER OR DIRECTOR

(305) 377-3561

FILED Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90080 001 ***150.00