

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 17, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000000942

1. Entity Name
SELECT SOFTWARE INTERNATIONAL, INC.



Principal Place of Business
**21507 CARIBBEAN LANE
PANAMA CITY BCH, FL 21413**

Mailing Address
**21507 CARIBBEAN LANE
PANAMA CITY BCH, FL 21413**



03042003 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-7143446

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WETZEL, ROBERT K
21507 CARIBBEAN LANE
PANAMA CITY BCH, FL 21413**

**DO NOT WRITE
IN THIS SPACE**

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 the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT WETZEL, ROBERT K 21507 CARIBBEAN LN PANAMA CITY, FL 32413
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS WETZEL, JUNE 21507 CARIBBEAN LN PANAMA CITY, FL 32413
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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05/17/04-80005-019 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 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.

SIGNATURE: Robert K. Wetzel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/19/07 850-230-0915