


FILED
May 27, 2003 8:00 am
Secretary of State

04-30-2003 90071 043 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 1. Entity Name P99000101688 AMERICAN SOFTWARE & Technologies, INC	
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DO NOT WRITE IN THIS SPACE

55043970

2. Principal Place of Business 351 NW 42nd Ave Suite, Apt. #, etc. # 306 City & State MIAMI - FL Zip 33126 Country USA	3. Mailing Address 351 NW 42nd Ave Suite, Apt. #, etc. Suite 306 City & State Miami FL Zip 33126 Country USA
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DO NOT WRITE IN THIS SPACE	4. FEI Number 65-0964042	Applied For <input type="checkbox"/> Not Applicable
	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
	7. Name and Address of Current Registered Agent	
	Name Janet Garay Street Address (P.O. Box Number is Not Acceptable) 351 NW 42nd Ave # 306 City Miami FL Zip Code 33126	

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

Janet Garay
Signature (Typed or printed name of registered agent and title acceptable)

(NOTE: Registered Agent Signature required when resigning)

DATE

04-28-03

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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	President OSPINA, LUIS C. 351 NW 42nd Ave # 306 MIAMI FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President OSPINA, GLORIA A. 351 NW 42nd Ave. # 306 MIAMI FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary JANET GARAY 351 NW 42nd Ave # 306 MIAMI FL 33126
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Janet Garay
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-7-03

Date

305-541 4959

Daytime Phone #

CR2E0348 (12/02)