FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S64068

1. Corporation Name

XANSOFT, CORP.

Principal Place of Business / Mailing Address

12651 S. DIXIE HIGHWAY #401
MIAMI, FLORIDA 33156

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07-31-1991
3a. Date of Last Report:

2. Principal Place of Business (21)
2a. Mailing Address (26)

Suite, Apt. #, etc. (22) / Suite, Apt. #, etc. (27)

City & State (23) / City & State (28)

Zip (24) Country (25) / Zip (29) Country (30)

4. FEI Number: 65-0276931 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

NAVARRO, XAVIER
10720 SW 60th. STREET
MIAMI, FL 33173

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] August 5th., 1996
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D/P	1.1 TITLE	☐ Change ☐ Addition
NAME	NAVARRO, XAVIER	1.2 NAME	
STREET ADDRESS	10720 SW 60th. STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33173	1.4 CITY-ST-ZIP	
TITLE	D/S	2.1 TITLE	☐ Change ☐ Addition
NAME	ARGUELLO, JOSE	2.2 NAME	
STREET ADDRESS	10720 SW 60th. STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33173	2.4 CITY-ST-ZIP	
TITLE	VP	3.1 TITLE	☐ Change ☐ Addition
NAME	NAVARRO, EMILIA	3.2 NAME	
STREET ADDRESS	10720 SW 60th. STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33173	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	400001920434
STREET ADDRESS		6.3 STREET ADDRESS	-08/13/96--01107--042
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***225.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: [signature] August 5th., 1996 (305)255-0904
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

8/13/96