## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # S89584

(4)

THE ULTIMATE SOFTWARE GROUP OF SOUTH FLORIDA, IN

97 JUN -2 AM 7: 168

SECRETARY OF STATE TALLAHASSEE FLORIDA



Principal Place of Business		Mailing Address			1 18541818 421 12110 1210. Avia. 18111 atal atal atal atal atal		
9111 STIRLING ROAD		3111 STIRLING RD					
SUITE 308		SUITE 308					
FT LAUDERDALE FL 33312		FT LAUDERDALE FL 3331	2-6566			T	
US		US		3. Date Incorporated or Qualified			
					10/24/1991	04/04/1996	
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	<del>  </del>	Applied For
21		26		<b>65-0289581</b> Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	4 4 4 4 4	Additional	
22		27			Fee F	Required	
City & State	8	City & State		6. Election Campaign Financing \$5.00 May Be			
23		28		Trust Fund Contribution			
Zip	Country	Zip	Zip Country		8. This corporation has liability for intangible tax under s. 199.032,		
24	25 29 30		30	Florida Statutes 💢 Yes 🗌 No			
	9. Name and Address of Curren	Registered Agent		r	10. Name and Address of New Re	gistered Agent	
ROB	ins, kevin		81	Name			
	3 N 46TH AVE		82 Street Ad		idress (P.O. Box Number is Not Acceptable)		
	438D		or Street Au		<u> 5000022012855</u>		
	LYWOOD FL 33021		83		<b>5000022012855</b> -06/04/9701058002		
,,,,,	2111000120021				****556	15 85 ZI	54.75
			84	City		" FI 85 21	o Code,
44 Dureupant	to the provisions of Sections 607.0500	and 607 1508. Florida Statu	itos the abov	e-named co	rooration submits this statement for the p	urpose of changing	its registered
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.							
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE						DATE	
	Signature, typed or printed name of registered ager		111: Hegistered Ag	ent signature req	uireo when reinstating) ADDITIONS/CHANGES TO OFFIC		RS IN 12
12.	OFFICERS AND	DELETE	1.1 TITLE		ADDITIONS/OFFANGES TO OFFICE	Change	
TITLE						C orongo	
NAME ROBINS, KEVIN .			1.2 NAME				
STREET ADDRESS 2806 N 46TH AVE APT 438D		1.3 STREET ADDR		ADDRESS			İ
CITY-ST-ZIP	HOLLYWOOD FL	<b>K</b> -7	1.4 CITY - 2.1 TITLE	S1 - ZIP		1 0	
TITLE	W DELETE					<u>∟</u> Change	Addition
NAME	DE LA NUEZ, ARTURO		2.2 NAME				1
STREET ADDRESS	10331 SW 45 ST		23 STREE	ADDRESS			-
CITY-ST-ZIP	MIAMI FL		2.4 DITY-	ST-ZIP			
TITLE	President + Treas	men DELETE	3.1 TITLE			Change	☐ Addition
NAME			3 2 NAME				
STREET ADDRESS	Scott Schere		3.3 STREE	ADDRESS			
CITY-ST-ZIP	1740 LAKE Shore Dr		3.4. CITY-	į			
TITLE	WESTON   FI	DELETE	4.1 TITLE	· · · · · · · · · · · · · · · · · · ·		☐ Change	Addition
NAME	Vir. + Secy	<del></del>	4 2 NAME	1			
	Alan Goldsten			I ADDRESS			ļ
STREET ADDRESS	12.50 490 SAECE WAY						j
CITY-ST-ZIP	DELETE		44 CITY-	21.74,		☐ Change	Addition
TITLE			5 1 TITLE				
NAME	MARE Schere		5.2 NAME				
STREET ADDRESS	•			TADDRESS			
CITY-ST-ZIP	אר אר אר אר		5.4 CITY-	ST-ZIP		T A	Addition
TITLE .			6.1 TITLE			Change	Addition
NAME			6.2 NAME		•		
STREET ADDRESS			6.3 STREE	1 ADDRESS			
CITY-ST-ZIP		_	64 CITY-				
14. Ldo herei	by certify that the information supplied	with this divid thes not qua			ed in Section 119.07(3)(i), Florida Statute	s. I further certify the	at the

ideal report is true and accurate and that my signature shall have the same legal effect as if made under oath; that trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name ent with an address. Information indicated on this annual report am an officer or director of the corpora appears in Block 12 or Block 13 if chan