## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

1	al report 1996		bivis	Secretary of Sta ON OF CORPOR				
DOCUN	ΛENT #	V30162	! (	4)		-		
	SOFTWARE	, INC.						
Principal Place	of Business		Mailing Address				B       B   B   B   B   B   B   B   B	
12318 STOCI JACKSONVILI	KBRIDGE CT. N		PO BOX 5748	5 E FL 32241-7485				
US	, 02000		US	L 12 02271 1100		3. Date Incorporated or Qualified	3a. Date of Las	•
2. Principal Pla	co of Business		2a, Mailing Addre			<b>04/17/1992</b> <b>4.</b> FEI Number	04/21/	1995 Applied For
2. ETIFICIPALETA 1	Se or Business		26 Mailing Addit	350		59-3115588	<u> </u>	Not Applicable
ຼ່ Suite, Apt. # ຊ	, elc.		Suite, Apt. #,	elc.		5. Certificate of Status Desired		75 Additional e Required
City & State			City & State			Election Campaign Financing     Trust Fund Contribution	\$5	.00 May Be
3   Z <sub>(f)</sub>		country	Zip	hana a	untry	8. This corporation has liability for i	intangible tax under	
4	25	Address of Current R	29	30	1	Florida Statutes Yes  10. Name and Address of New R	No	
	9, Manie and	Address of Content A	legistered Agent		81 Name	TU, Maille allo Address of New h	registered Agent	
GOYCO	CHEA, FRANK				82 Street Add	ress (P.O. Box Number is Not Acceptab	ale)	
12318 S	TOCKBRIDGE					1622 (1.10. COX 113.1120 (1.10. 1.000) (1.10.	·-··	
JACKSO	NVILLE FL 322	!58			83			
11. Pursuant to or registere	o the provisions of ed agent, or both,	Sections 607.0502 an in the State of Florida	d 607.1508, Florida Such change was	a Statutes, the ab authorized by the	84 City ove named corpor corporation's boa	ration submits this statement for the pur ord of directors. Thereby accept the appr		Zip Code s registered office ed agent. I am
		d name of registered agent and	tide if applicable			ration submits this statement for the pur rd of directors. Thereby accept the appoint of which revolutings		•
SIGNATURE			tide if applicable DIRECTORS	(NOTE: Registers	Ove named corpor corporation's board Agent signature require		rpose of changing in orntment as registed DATE ICERS AND DIREC	s registered office red agent. I am TORS IN 12
SIGNATURE 12.	Stynature: typed or printe	of name of registered agric, and OFFICERS AND D	tide if applicable	(NOTE: Registere 13	jove named corpoi corporation's boa od Agent signature require	st vher reustalngi	rpose of changing in continent as registed	s registered office red agent. I am TORS IN 12
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cerey may me mormation 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 eath, that I am an officer or director of the corporation or the receiver or true empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if projector or an attachment with an address.

SIGNATURE: FRANK GOYCOCHEA

4/11/96 (904) 262-7374.