

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750)

FILED

Oct 08 1998 8:00am  
 Secretary of State

009076

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # F94000004756 (2)

1. Corporation Name  
 QUALITATIVE MARKETING SOFTWARE, INC.

Principal Place of Business:  
 28051 US HIGHWAY 19 NORTH  
 SUITE E  
 CLEARWATER FL 34621  
 US

Mailing Address:  
 28051 US HIGHWAY 19 NORTH  
 SUITE E  
 CLEARWATER FL 34621  
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business:

21 28050 US Hwy 19 N

22 Ste #500

23 Clearwater, FL

24 33761-2630 Pinellas

2a. Mailing Address:

26 28050 US Hwy 19 N

27 Ste #500

28 Clearwater, FL

29 33761-2630 Pinellas

9. Name and Address of Current Registered Agent

POSTLER, CHARLES A.  
 110 E MADISON ST  
 STE 200  
 TAMPA FL 33602

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

3. Date Incorporated or Qualified

09/14/1994

4. FIC Number

59-3253423

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of sections 602.0502 and 602.0504, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent 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 I accept the obligations of, section 602.0505, Florida Statutes.

SIGNATURE

12. Signature of Officer or Director

13. Signature of Agent

DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME: PC	11000
NAME: WRAY, PAUL	126498
STREET ADDRESS: 1410 WILLOW BROOK DRIVE	13500 (ADDRESS)
CITY/STATE: PALM HARBOR FL 34683	14000 (STATE)
NAME: VDT	21000
NAME: REBHAN, GEORGE	22859
STREET ADDRESS: 4174 NIBLICK DRIVE	23500 (ADDRESS)
CITY/STATE: LONG MONT CO 80503	24000 (STATE)
NAME: SVD	33000
NAME: CLOW, BEACH	32859
STREET ADDRESS: 4383 APPLE COURT	33500 (ADDRESS)
CITY/STATE: BOULDER CO 80301	34000 (STATE)
NAME: [ ]	41000
NAME: [ ]	42500
STREET ADDRESS: [ ]	43500 (ADDRESS)
CITY/STATE: [ ]	44000 (STATE)
NAME: [ ]	47500
STREET ADDRESS: [ ]	48500 (ADDRESS)
CITY/STATE: [ ]	49000 (STATE)
NAME: [ ]	53000
STREET ADDRESS: [ ]	53500 (ADDRESS)
CITY/STATE: [ ]	54000 (STATE)
NAME: [ ]	61500
STREET ADDRESS: [ ]	62500 (ADDRESS)
CITY/STATE: [ ]	63000 (STATE)

14. I, hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(b) Florida Statutes. I further certify that the information included on this annual report or supplemental statement is true and accurate, and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the person or persons empowered to execute this report as required by Chapter 602, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, and in an affidavit with an address.

SIGNATURE:

*Paul Wray*  
 SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/28/98 (727) 795-9127  
 Date: Signature:

009076