

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
 AMOUNT DUE ON OR BEFORE 6/28/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT CORPORATION ANNUAL REPORT 1995



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

FILED

95 JUL -7 AM 9:31

SECRETARY OF STATE
 TALLAHASSEE FLORIDA

DOCUMENT # P94000090821 (7)

1. Corporation Name

BUSINESS SOFTWARE DEVELOPERS, INC.

Principal Place of Business

Mailing Address

170 NW 78TH TERRACE BLDG. 2 STE. 102
 PEMBROKE PINES FL 33024

170 NW 78TH TERRACE BLDG. 2 STE. 102
 PEMBROKE PINES FL 33024

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/15/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 170 NW 78 TERRACE

26 170 NW 78TH TERRACE

4. FEI Number

65-0539988

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 BLDG 2 STE 102

27 SAME

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

23 SAME

28 SAME

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24 SAME

25 SAME

29 SAME

30 SAME

8. This corporation has liability for intangible tax under s. 199.03(2), Florida Statutes

Yes No

8. Name and Address of Current Registered Agent

TILLEM, SCOTT
 3284 NO. STATE ROAD 7
 LAUDERDALE LAKES FL 33319

10. Name and Address of New Registered Agent

81 Name BOB ESCHBAUGH
 82 Street Address (P.O. Box Number is Not Acceptable) 170 NW 78TH TERRACE
 83 BLDG 2 STE 102
 84 City PEMBROKE PINES FL 85 Zip Code 33024

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

6/28/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE 170 PVST
 NAME ESCHBAUGH, ROBERT V
 STREET ADDRESS 170 NW 78TH TERRACE BLDG. 2 STE. 102
 CITY-ST-ZIP PEMBROKE PINES FL 33024

1.1 TITLE
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

TITLE 170 D
 NAME ESCHBAUGH, ROBERT V
 STREET ADDRESS 170 NW 78TH TERRACE BLDG. 2 STE. 102
 CITY-ST-ZIP PEMBROKE PINES FL 33024

2.1 TITLE
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

3.1 TITLE
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

4.1 TITLE
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

5.1 TITLE
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

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)(M), 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 typed or printed name of signing officer or director

6/28/95

305 962 4580

CR2E034 (3/95)