

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **F93000005241 (5)**

1. Corporation Name
RASTER GRAPHICS, INC.



Principal Place of Business

3025 ORCHARD PKWY
SAN JOSE CA 95134
US

Mailing Address

3025 ORCHARD PKWY
SAN JOSE CA 95134
US

2. Principal Place of Business

2a. Mailing Address

21. **San Jose**
State, Apt #, etc.

26. **3025 orchard pkwy**
State, Apt #, etc.

22. **San Jose, CA**
City & State

27. **San Jose, CA**
City & State

23. **95134**
Zip

24. **Santa Clara**
Country

28. **95134**
Zip

29. **Santa Clara**
Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 607.0002 and 607.1506, 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 607.0005, Florida Statutes.

SIGNATURE

NOTE: Registered Agent's name must appear in this column.

DATE

12. OFFICERS AND DIRECTORS

11A	CCTO	<input checked="" type="checkbox"/> DELETE
NAME	BIBL, ANDREAS	
STREET ADDRESS	588 HARRINGTON DRIVE	
CITY, ST, ZIP	LOS ALTOS CA 94022	
TITLE	VCFO	<input checked="" type="checkbox"/> DELETE
NAME	BUCKLEY, JAMES R	
STREET ADDRESS	7074 ELWOOD ROAD	
CITY, ST, ZIP	SAN JOSE CA 95120	
TITLE	PCEO	<input type="checkbox"/> DELETE
NAME	KUMAR, RAK	
STREET ADDRESS	535 EL ARROYO	
CITY, ST, ZIP	HILLSBOROUGH CA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	NARDECCHIA, SEBASTIAN	
STREET ADDRESS	1394 VAN PATTEN DRIVE	
CITY, ST, ZIP	DANVILLE CA 94526	
TITLE	Director	<input type="checkbox"/> DELETE
NAME	LUCIO Lanza	
STREET ADDRESS	2180 Sand Hill Rd, #200	
CITY, ST, ZIP	Menlo Park, CA 94025	
TITLE	Director	<input type="checkbox"/> DELETE
NAME	Frank Caufield	
STREET ADDRESS	4 Embarcadero Cmt, #3520	
CITY, ST, ZIP	San Francisco, CA 94111	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME	
13. STREET ADDRESS	
14. CITY, ST, ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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)(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 registered or trusted agent named 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: **Mr Rak Kumar**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rak Kumar

2/12/96

DATE

408-232-4000

DEPT. PHONE #

CR2E034 (12/95)