

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

FILED
Apr 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F93000005241 (5)
 1. Corporation Name
RASTER GRAPHICS, INC.



Principal Place of Business 3025 ORCHARD PKWY SAN JOSE CA 95134-2017 US	Mailing Address 3025 ORCHARD PKWY SAN JOSE CA 95134-2017 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/18/1993	
21	22	26	27	4. FEI Number 94-3046090	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23	24	28	29	7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Zip	Country	Zip	Country		

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
				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 607.0502 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: *Todd Lowenstein* **TODD LOWENSTEIN, CONTROLLER** DATE: **1-26-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LUCIO, LANZA	1.2 NAME	CHARLIE CASE
STREET ADDRESS	2180 SSND HILL RD #200	1.3 STREET ADDRESS	540 HIGHLAND ST
CITY-ST-ZIP	MENLO PARK CA	1.4 CITY-ST-ZIP	N. MARSHFIELD, MA 02054
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAUFIELD, FRANK	2.2 NAME	
STREET ADDRESS	4 EMBARCADERO CNT #3520	2.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA	2.4 CITY-ST-ZIP	
TITLE	PCEO	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KUMAR, RAK	3.2 NAME	
STREET ADDRESS	535 EL ARROYO	3.3 STREET ADDRESS	
CITY-ST-ZIP	HILLSBOROUGH CA	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NARDECCHIA, SEBASTIAN	4.2 NAME	
STREET ADDRESS	1394 VAN PATTEN DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	DANVILLE CA 94528	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAHONEY, DENNIS	5.2 NAME	
STREET ADDRESS	3025 ORCHARD PARKWAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	SAN JOSE CA 95134	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Rak Kumar* **RAK KUMAR, CEO** DATE: **3/30/98** **408 232 4060**

CR2E034 (10/97)