

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

**FILED**  
**Jul 25 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

**DOCUMENT # P94000011173 (9)**  
 1. Corporation Name  
**BOTTOM LINE IMAGES, INC.**



Principal Place of Business <b>3161 SW 117TH AVE DAVIE FL 33330 US</b>	Mailing Address <b>3161 SW 117TH AVE DAVIE FL 33330-1423 US</b>
---	--

3. Date Incorporated or Qualified <b>02/04/1994</b>	3a. Date of Last Report <b>06/21/1996</b>
4. FEI Number <b>65-0516447</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>26</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>
City & State <b>23</b>	City & State <b>28</b>
Zip <b>24</b>	Country <b>25</b>
Zip <b>29</b>	Country <b>30</b>

**9. Name and Address of Current Registered Agent**

**CASTILLO, A. DEAN**  
**3161 SW 117TH AVE.**  
**DAVIE FL 33330**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

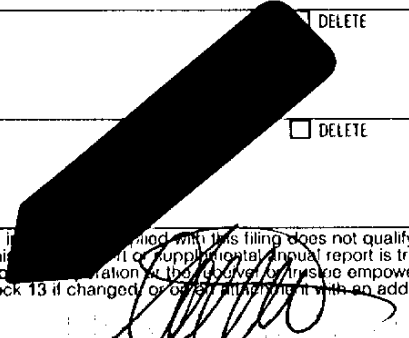
**12. OFFICERS AND DIRECTORS**

TITLE	<b>CEO</b>	<input type="checkbox"/> DELETE
NAME	<b>CASTILLO, DEAN A</b>	
STREET ADDRESS	<b>3161 SW 117TH AVE.</b>	
CITY-ST-ZIP	<b>DAVIE FL</b>	
TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>STEPHENSON, DWIGHT</b>	
STREET ADDRESS	<b>3161 SW 117TH AVE</b>	
CITY-ST-ZIP	<b>DAVIE FL</b>	
TITLE	<b>VC</b>	<input type="checkbox"/> DELETE
NAME	<b>MARINO, DANIEL C</b>	
STREET ADDRESS	<b>3161 SW 117TH AVE.</b>	
CITY-ST-ZIP	<b>DAVIE FL</b>	
TITLE	<b>EVP</b>	<input type="checkbox"/> DELETE
NAME	<b>STRINGER, RALPH</b>	
STREET ADDRESS	<b>3161 SW 117TH AVE</b>	
CITY-ST-ZIP	<b>DAVIE FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 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 type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information indicated on this 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 and that I have been 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 first mentioned with an address.

SIGNATURE: 

CR2E034 (9/96)