

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

FILED

Mar 13 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
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DOCUMENT # **F96000002328 (0)**

1. Corporation Name  
**PRINTRAK INTERNATIONAL INC.**



Principal Place of Business <b>1250 N. TUSTIN AVE. ANAHEIM CA 92807</b>	Mailing Address <b>1250 N. TUSTIN AVE. ANAHEIM CA 92807-1617</b>
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3. Date Incorporated or Qualified <b>05/09/1996</b>	3a. Date of Last Report <b>5/96</b>
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2. Principal Place of Business 21 <b>1250 N. Tustin Ave</b>	2a. Mailing Address 26 <b>1250 N. Tustin Ave</b>
Suite, Apt. # etc.	Suite, Apt. #, etc.
22 City & State <b>Anaheim, CA</b>	27 City & State <b>Anaheim CA</b>
23 Zip <b>92807</b>	28 Country <b>U.S.A.</b>
24 <b>92807</b>	29 <b>U.S.A.</b>

4. FEI Number <b>33-0070547</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" 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 checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324</b>	
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10. Name and Address of New Registered Agent	
81 Name <b>same</b>	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City <b>FL</b>	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 *Thomas Middleton* DATE **2-14-97**

12. OFFICERS AND DIRECTORS	
TITLE	COB <input type="checkbox"/> DELETE
NAME	<b>GILES, RICHARD M</b>
STREET ADDRESS	<b>1250 NORTH TUSTIN AVENUE</b>
CITY-ST-ZIP	<b>ANAHEIM CA 92807</b>
TITLE	COOD <input checked="" type="checkbox"/> DELETE
NAME	<b>SMITH, CHARLES L</b>
STREET ADDRESS	<b>1250 NORTH TUSTIN AVENUE</b>
CITY-ST-ZIP	<b>ANAHEIM CA 92807</b>
TITLE	VD Sr. VP-Operations <input type="checkbox"/> DELETE
NAME	<b>HARDY, JOHN G</b>
STREET ADDRESS	<b>1250 NORTH TUSTIN AVENUE</b>
CITY-ST-ZIP	<b>ANAHEIM CA 92807</b>
TITLE	VD <input type="checkbox"/> DELETE
NAME	<b>MCNEFF, DAVID L</b>
STREET ADDRESS	<b>1250 NORTH TUSTIN AVENUE</b>
CITY-ST-ZIP	<b>ANAHEIM CA 92807</b>
TITLE	CFOD <input type="checkbox"/> DELETE
NAME	<b>MCDONNELL, KEVIN P</b>
STREET ADDRESS	<b>1250 NORTH TUSTIN AVENUE</b>
CITY-ST-ZIP	<b>ANAHEIM CA 92807</b>
TITLE	V <input type="checkbox"/> DELETE
NAME	<b>DRISCOLL, DANIEL J</b>
STREET ADDRESS	<b>1250 NORTH TUSTIN AVENUE</b>
CITY-ST-ZIP	<b>ANAHEIM CA 92807</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	Secretary/Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	<b>Susanna Bennett</b>
1.3 STREET ADDRESS	<b>1250 N. Tustin Avenue</b>
1.4 CITY-ST-ZIP	<b>Anaheim, CA 92807</b>
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 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: *Susanna Bennett* DATE: **2/21/97** DAYTIME PHONE: **714/238-2039**

CR2E034 (9/96)