

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED  
Sep 24 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000003231 (5)

1. Corporation Name

BACK-IN-A-FLASH, INC.

Principal Place of Business

1135 W. 6TH ST., STE 140  
AUSTIN TX 78703

Mailing Address

1135 W. 6TH ST., STE 140  
AUSTIN TX 78703

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/26/1996	3a. Date of Last Report
4. FEI Number 74-2730333	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PRESIDENT
NAME	BLOOMQUIST, GYNN	1.2 NAME	Bloomquist, GYNN
STREET ADDRESS	1 CRYSTAL SPRINGS CT #G	1.3 STREET ADDRESS	3 CLUB ESTATES PKWY
CITY-ST-ZIP	AUSTIN TX	1.4 CITY-ST-ZIP	AUSTIN, TX 78738
TITLE	VPD	2.1 TITLE	TREASURER
NAME	MENARON, GERALD	2.2 NAME	Noboru Tanaka
STREET ADDRESS	4802 CAP ROCK DR	2.3 STREET ADDRESS	470 MILLER RD
CITY-ST-ZIP	AUSTIN TX	2.4 CITY-ST-ZIP	NYE, NY 10580
TITLE	CSD	3.1 TITLE	Secretary
NAME	INGRAHAM, HUB	3.2 NAME	Jonathan E. File
STREET ADDRESS	2026 WESTLAKE COVE	3.3 STREET ADDRESS	77 Hillside Avenue
CITY-ST-ZIP	AUSTIN TX	3.4 CITY-ST-ZIP	Mount Kisco, NY 10549
TITLE	D	4.1 TITLE	
NAME	BECKER, DONALD W	4.2 NAME	
STREET ADDRESS	7334 ASHTON	4.3 STREET ADDRESS	
CITY-ST-ZIP	SAN ANTONIO TX	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	STETSON, ROBERT J	5.2 NAME	
STREET ADDRESS	10915 CROOKED CREEK DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	
NAME	INGRAHAM, SCOTT	6.2 NAME	
STREET ADDRESS	4041 EAST SUNSET ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	HENDERSON NV	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: X *[Signature]* GYNN BLOOMQUIST 9.3.97 512 477.4316

CR2E034 (4/97)