
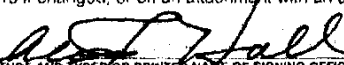


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F97172 (3)			
1. Corporation Name COLOR IMAGES, INC.			
Principal Place of Business % STEPHEN D REDDEN 5459 115TH AVENUE NORTH CLEARWATER FL 34620		Mailing Address % STEPHEN D REDDEN 5459 115TH AVENUE NORTH CLEARWATER FL 34620-4842	
2. Principal Place of Business 21 Color Images, Inc. Suite, Apt. #, etc. 22 City & State 23 Zip Country 24 25		2a. Mailing Address 26 same Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30	
g. Name and Address of Current Registered Agent HALL, ALICE J 715 A. FIRST ST. INDIAN ROCKS BEACH FL 34635		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City Clearwater FL 85 Zip Code 34624	
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 Alice J. Hall DATE 4/30/97 (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE C NAME HALL, GLENN W STREET ADDRESS 715 A FIRST ST CITY-ST-ZIP INDIAN ROCKS FL		1.1 TITLE CEO 1.2 NAME Hall, Glenn W. 1.3 STREET ADDRESS 19029 U.S. Hwy 19N. #10F 1.4 CITY-ST-ZIP Clearwater, FL. 34624	
TITLE P NAME HALL, ALICE J JONES STREET ADDRESS 715 A FIRST ST CITY-ST-ZIP INDIAN ROCKS BCH FL		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 19029 U.S. Hwy 19N. #10F 2.4 CITY-ST-ZIP Clearwater, FL. 34624	
TITLE D NAME REDDEN, STEPHEN D STREET ADDRESS 5681 108TH AVE. CITY-ST-ZIP PINELLAS PK. FL		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE T NAME VARNER, ROBIN LEE STREET ADDRESS 5681 108TH AVE. CITY-ST-ZIP PINELLAS PK. FL		4.1 TITLE Robin Redden 4.2 NAME 4.3 STREET ADDRESS 5681 108th Ave/ 4.4 CITY-ST-ZIP Pinellas Park, FL. 34666	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 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: 		4-30-97 83-573-7723 Date Daytime Phone #	



CR2E034 (9/96)