


**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.**  
**AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).**

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>				<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Northam</b> <i>Handwritten: Amended</i> <b>SECRETARY OF STATE</b> <b>DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT # L24356 (2)</b> <b>1. Corporation Name</b> <b>COLOR CAMERA SYSTEMS, INC.</b>					

**FILED**  
**98 DEC -8 PM 6:18**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

<b>Principal Place of Business</b> <b>345 W. MICHIGAN ST., SUITE 106</b> <b>ORLANDO, FL. 32806</b>		<b>Mailing Address</b> <b>SAME</b>	
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<b>2. Principal Place of Business</b> <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b> Country		<b>2a. Mailing Address</b> <b>25</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip <b>29</b> Country	
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DO NOT WRITE IN THIS SPACE

<b>3. Date Incorporated or Qualified</b> <b>10/20/1989</b>	
<b>4. FEI Number</b> <b>59-2975148</b>	<b>Applied For</b> <b>Not Applicable</b>
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	

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

**Bially, Heinz**  
**345 WEST MICHIGAN ST., #104**  
**ORLANDO, FL. 32806**

**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** *Heinz Bially* *Conrad Finney* **12/03/98**  
Signature typed or printed name of registered agent and title if applicable (Note: Registered Agent signature required when reinstating) DATE

**12. OFFICERS AND DIRECTORS**

<b>TITLE</b> <b>D</b> <input checked="" type="checkbox"/> <b>DELETE</b> <b>NAME</b> <b>CRUSE, HERMANN A.</b> <b>STREET ADDRESS</b> <b>345 W. MICHIGAN ST., #106</b> <b>CITY-ST-ZIP</b> <b>ORLANDO, FL. 32806</b>	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>
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<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>

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

<b>11 TITLE</b> <b>D</b> <input type="checkbox"/> <b>Change</b> <input checked="" type="checkbox"/> <b>Addition</b> <b>12 NAME</b> <b>Bially, Heinz</b> <b>13 STREET ADDRESS</b> <b>345 W. MICHIGAN ST., #104</b> <b>14 CITY-ST-ZIP</b> <b>ORLANDO, FL. 32806</b>	<b>2.1 TITLE</b> <b>2.2 NAME</b> <b>2.3 STREET ADDRESS</b> <b>2.4 CITY-ST-ZIP</b>
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**3000002709443-9**  
**-12/10/98-01034-005**  
**\*\*\*\*\*61.25 \*\*\*\*\*61.25**

*Handwritten: B 12/8/98 AR*

**14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:** *Conrad Finney* **01-31-98** **407-425-4063**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/98)