FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 4:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P19477** **(9)**

1. Corporation Name
ARTRAC CORPORATION

Principal Place of Business	Mailing Address
2700 CUMBERLAND PKWY STE. #300 ATLANTA GA 30339	2700 CUMBERLAND PKWY STE. #300 ATLANTA GA 30339

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/02/1988
3a. Date of Last Report: 02/18/1994
4. FEI Number: 58-1753105 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. The corporation has liability for intangible tax under s. 199.062 Florida Statutes ☒ Yes ☐ No

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

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	BROWN, RANDOLPH G.	12 NAME	
STREET ADDRESS	2700 CUMBERLAND PKWY #300	13 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	14 CITY-ST-ZIP	
TITLE	CEOD	21 TITLE	☐ Change ☐ Addition
NAME	BYERLY, DENNIS R.	22 NAME	
STREET ADDRESS	5990 OAKBROOK PKWY	23 STREET ADDRESS	
CITY-ST-ZIP	NORCROSS GA	24 CITY-ST-ZIP	
TITLE	SVPD	31 TITLE	☐ Change ☐ Addition
NAME	COTE, MICHAEL R	32 NAME	
STREET ADDRESS	2700 CUMBERLAND PKWY #300	33 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA, GA	34 CITY-ST-ZIP	
TITLE	VS	41 TITLE	☐ Change ☐ Addition
NAME	TOPPER, PAMELA S.	42 NAME	
STREET ADDRESS	2700 CUMBERLAND PKWY	43 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	44 CITY-ST-ZIP	
TITLE	P	51 TITLE	☐ Change ☐ Addition
NAME	PITTMAN, JULIAN V	52 NAME	
STREET ADDRESS	5990 OAKBROOK PKWY	53 STREET ADDRESS	
CITY-ST-ZIP	NORCROSS GA	54 CITY-ST-ZIP	
TITLE	VT	61 TITLE	T ☒ Change ☐ Addition
NAME	ALEXANDER, G. EDWARD JR	62 NAME	Caryn S. Dickson
STREET ADDRESS	2700 CUMBERLAND PKWY	63 STREET ADDRESS	2700 Cumberland Pkwy., Ste. 300
CITY-ST-ZIP	ATLANTA GA	64 CITY-ST-ZIP	Atlanta, GA 30339

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Pamela S. Topper PAMELA S. TOPPER 4-19-95 (404)319-3300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0399281 FP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

DOCUMENT # P19515 (6)

1. Corporation Name
FRANKS FARMS, INC.

Principal Place of Business	Mailing Address
P.O. BOX 7337 SHREVEPORT LA 71137-7337	P.O. BOX 7337 SHREVEPORT LA 71137-7337

3. Date Incorporated or Qualified: 06/03/1988	3a. Date of Last Report: 09/29/1994
4. FEI Number: 72-0892113	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business: 21 ___ Suite, Apt. #, etc. 22 ___ City & State 23 ___ Zip 24 ___ County 25 ___

2a. Mailing Address: 26 ___ Suite, Apt. #, etc. 27 ___ City & State 28 ___ Zip 29 ___ Country 30 ___

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	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 ______ [illegible] ______ DATE

12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	1 TITLE	☐ Change ☐ Addition
NAME	FRANKS, JOHN	12 NAME	
STREET ADDRESS	1312 N. HEARNE AVE	13 STREET ADDRESS	
CITY-ST-ZIP	SHREVEPORT LA 71107	14 CITY-ST-ZIP	
TITLE	STD	21 TITLE	☐ Change ☐ Addition
NAME	FRANKS, ALTA V.	22 NAME	
STREET ADDRESS	1312 N. HEARNE AVE	23 STREET ADDRESS	
CITY-ST-ZIP	SHREVEPORT LA 71107	24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: [signature] John Franks, President 4-30-95 318-221-2688

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0480440 FN

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -4 ... 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P20347** **(1)**

1. Corporation Name

ALLIANCE IMAGING, INC.

Principal Place of Business	Mailing Address
3111 NORTH TUSTIN AVENUE SUITE 150 ORANGE CA 92665	3111 NORTH TUSTIN AVENUE SUITE 150 ORANGE CA 92665

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/04/1988**	3a. Date of Last Report: **06/16/1994**
4. FEI Number: **33-0239910**	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199 ... Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business — 21 — Suite, Apt. #, etc. 22 — City & State 23 — Zip 24 — Country 25

2a. Mailing Address — 26 — Suite, Apt. #, etc. 27 — City & State 28 — Zip 29 — Country 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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.... and 617..., 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 s. ... Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

Field	Entry
TITLE	PD
NAME	ZEHNER, RICHARD N.
STREET ADDRESS	3111 NORTH TUSTIN AVE., SUITE 150
CITY-ST-ZIP	ORANGE CA 92665-1752
TITLE	VPCD
NAME	PINO, VINCENT S
STREET ADDRESS	3111 NORTH TUSTIN AVE., SUITE 150
CITY-ST-ZIP	ORANGE CA 92665-1752
TITLE	VPS
NAME	WHITE, TERRENCE M
STREET ADDRESS	3111 NORTH TUSTIN AVE., SUITE 150
CITY-ST-ZIP	ORANGE CA 92665-1752
TITLE	VP
NAME	MERICLE, JAY A
STREET ADDRESS	3111 NORTH TUSTIN AVE., SUITE 150
CITY-ST-ZIP	ORANGE CA 92665-1752
TITLE	VP
NAME	ANDURES, TERRY A
STREET ADDRESS	3111 NORTH TUSTIN AVE., SUITE 150
CITY-ST-ZIP	ORANGE CA 92665-1752
TITLE	CAS
NAME	LEEMAN, BARBARA A
STREET ADDRESS	3111 NORTH TUSTIN AVE., SUITE 150
CITY-ST-ZIP	ORANGE CA 92665-1752

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

SEE ATTACHED SCHEDULE

14. I do hereby certify that the information supplied with this filing ... and does not qualify for the exemption stated in Section ... 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: [signature] Barbara Leeman — 5-1-95 — (714) 921-5656

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0482482 FP

020347

ALLIANCE IMAGING, INC.
FEIN 33-0239910
3111 N. TUSTIN AVE., ST. 150
ORANGE, CA 92665-1752

LIST OF OFFICERS AND DIRECTORS

NAME	POSITION	ADDRESS
OFFICERS:		
Richard N. Zehner	President	3111 N. Tustin Ave., St. 150 Orange, CA 92665-1752
Vincent S. Pino	Executive Vice President *Chief Operating Officer*	3111 N. Tustin Ave., St. 150 *Orange, CA 92665-1752*
Neil M. Cullinan	Senior Vice President	1017 High Street Macon, GA 31201
Terrence M. White	Senior Vice President-Finance Chief Financial Officer Secretary	3111 N. Tustin Ave., St. 150 Orange, CA 92665-1752
Jay A. Mericle	Senior Vice President-Operations	3111 N. Tustin Ave., St. 150 Orange, CA 92665-1752
Terry A. Andrues	Senior Vice President- Customer Support	3111 N. Tustin Ave., St. 150 Orange, CA 92665-1752
Cheryl Ford	Vice President	44 Hunters Crossing Burlington, CT 06013
Barbara A. Leeman	Controller Assistant Secretary	3111 N. Tustin Ave., St. 150 Orange, CA 92665-1752
DIRECTORS:		
Richard N. Zehner		3111 N. Tustin Ave., St. 150 Orange, CA 92665-1752
Robert Waley-Cohen		3111 N. Tustin Ave., St. 150 Orange, CA 92665-1752
Vincent S. Pino		3111 N. Tustin Ave., St. 150 Orange, CA 92665-1752
James M. Buncher		3111 N. Tustin Ave., St. 150 Orange, CA 92665-1752

FILENAME: D:\MISC\OFFICERS REV - 10-Feb-95

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED

DOCUMENT # P20676 (3)

1. Corporation Name
MICROS POS, INC.

Principal Place of Business
12000 BALTIMORE AVENUE
BELTSVILLE MD 20705-6384

Mailing Address
12000 BALTIMORE AVENUE
BELTSVILLE MD 20705-6384

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/29/1988
3a. Date of Last Report: 04/27/1994
4. FEI Number: 52-1101488 — Applied For / Not Applicable

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

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RAOD
PLANTATION FL 33324

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

Title	Name	Street Address	City-St-Zip
P	GIANNOPOULOS, A L	12000 BALTIMORE AVE.	BELTSVILLE MD
VP	ARMSTRONG, T PAUL	12000 BALTIMORE AVE.	BELTSVILLE MD
S	WILBERT, JUDITH	12000 BALTIMORE AVE.	BELTSVILLE MD
VT	KOLSON, RONALD J.	12000 BALTIMORE AVE.	BELTSVILLE MD
D	BROWN, LOUIS M JR	12000 BALTIMORE AVE.	BELTSVILLE MD
D	GIANNOPOULOS, A.L.	12000 BALTIMORE AVE.	BELTSVILLE MD

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

(Six blank entries: Title, Name, Street Address, City-St-Zip — ☐ Change ☐ Addition)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(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: Gary C Kaufman — Gary C. Kaufman VP/CFO 4/21/95 301-210-6000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0474660 FP

'52-1101488

P20676

Revised 02/95

MICROS SYSTEMS, INC.
12000 BALTIMORE AVENUE
BELTSVILLE, MARYLAND 20705-1291

CORPORATE OFFICERS

Tom Giannopoulos
President
Chief Executive Officer

Ronald J. Kolson
Executive Vice President
Chief Operating Officer

Donny N. Anderson
Vice President
Dealer Sales - Americas

Thomas Paul Armstrong
Vice President
Full Service Product

William Buckley
Vice President
Manufacturing

Kenneth Fisher
Vice President
Fast Service Food

Daniel G. Interlandi
Senior Vice President
Sales & Marketing

Bernard Jammet
Vice President
European Operations

Gary C. Kaufman
Vice President
Finance & Administration/CFO

Rick Lamy
Vice President
Major Accounts

Mike Mahoney
Vice President
Customer Service

Jim Walsh
Vice President & Product Manager
Customer Service

Roberta Watson
Vice President/Controller

Judith Wilbert
Corporate Secretary

*52-1101488

P20676

MICROS SYSTEMS, INC.
12000 BALTIMORE AVENUE
BELTSVILLE, MARYLAND 20705

BOARD OF DIRECTORS

Louis M. Brown, Jr., Chairman of the Board

Daniel Cohen

A.L. Giannopoulos

Carroll Johnson

Alan M. Voorhees

Edward T. Wilson