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

FILED Jul 25 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # P94000011173 (9) BOTTOM LINE IMAGES, INC. Principal Place of Business Mailing Address 3161 SW 117TH AVE 3161 SW 117TH AVE DAVIE FL 33330-1423 DAVIE FL 33330 3. Date Incorporated or Qualified 3a. Date of Last Report 06/21/1996 02/04/1994 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0516447 Not Applicable 26 Suite. Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Ř1 CASTILLO, A. DEAN 3161 SW 117TH AVE Street Address (P.O. Box Number is Not Acceptable) **B2 DAVIE FL 33330** 63 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.050? 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 nigistered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change TITLE 1.1 TITLE CASTILLO, DEAN A NAME 1.2 NAME 3161 SW 117TH AVE. STREET ADDRESS 1.3 STREET ADDRESS DAVIE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE STEPHENSON, DWIGHT NAME 22 NAME 3161 SW 117TH AVE 2.3 STREET ADDRESS STREET ADDRESS DAVIE FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 3.1 TITLE MARINO, DANIEL C NAME 3.2 NAME 3181 SW 117TH AVE. STREET ADDRESS 3.3 STREET ADDRESS Davie fl 3.4. CITY-ST-ZIP CITY-ST-ZIF DELETE ☐ Change Addition TITLE 4.1 TITLE STRINGER, RALPH 4 2 NAME NAME 3161 SW 117TH AVE STREET ADDRESS 4.3 STREET ADDRESS DAVIE FL 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 51 TITLE 52 NAME NAME 53 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE 62 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the pour report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the same legal effect as if made under oath; that the same legal effect as if made under oath; that the same legal effect as if made under oath; that the same legal effect as if made under oath; that the same legal effect as if made under oath; that the same legal effect as if made under oath; that the same legal effect as if made under oath; that the same legal effect as if the same leg

CITY-ST-ZIP

14. I do hereby certify that the information indicated on this

I am an officer or director of allon appears in Block 12 or Block 13 if changed

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