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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

**DOCUMENT # P98000068870** 

1. Corporation Name

IMAGING SYSTEMS INTERNATIONAL, INC.

1

## **FILED** Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90205 048 \*\*\*150.00

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Principal Place	e of Business	Mailing Address													
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							3.	Date Incor	porated of	r Qualife	d <b>R</b>				
2 Principal P	lace of Business	22	. Mailing Address				4.	FEI Numb	61 7 7 4	_			$\neg  o$	App	lied For
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_	#, etc.	27	Conto, riphi ii, otor				5.	Certifcate	of Status	Desired				Req	
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24 <u>33196</u>	9. Name and Address of Current			<u> </u>				Name and			Registe				
	9. Name and Address of Current	Kegis	stered Agent		31	Name		Traine and						-	
												<del> </del>			
MARCIA	A C. ALVAREZ			8	32	Street Ad	ddress (P.	O. Box Nu	mber is N	Not Accep	otable)				
10260	SW 161st AVE			8	33					•					
MIAMI,	, FL 33196			1	34	City							85 2	Zip Co	ode
						-						FL			
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	f Flori	da. Such change was aut	thorized t	oy th	named co e corpora	corporation ration's boa	submits thard of direc	nis statem ctors. I he	ent for the reby acc	e purposept the a	se of cappoint	hanging tment a	g its regi	egistered stered
SIGNATURE	Signature, typed or printed name of registered agent					ionature recu	quired when re	enstation)		·	DA1	TE			
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5111-01-4IF				44											

CITY-ST-ZIP 14. I 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, with all other like empowered.

SIGNATURE: 🗹