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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name F95000001824 (0)

IMAJE	INK JET PRINTING CORPO	RATION			
Principal Plac	e of Business	Mailing Address			101 (488) 101(0 PAC(1 BUEL PAG(1
1650 AIRPOR	TRÓ	1650 AIRPORT RD.			
SUITE 103		SUITE 103			
KENNESAW GA 30144		KENNESAW GA 30144		DO NOT WRITE IN THIS	SPACE
ļ				3. Date Incorporated or Qualified	
				04/14/1995	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		[26]		58-1734567	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 City & Stat		City & State			
23 City & Stat	e			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	28 Zip	Country		Added to Fees
24	├ - ¬ '		30	 This corporation owes or has paid the or Personal Property Tax due June 30. 	urrent year intangible No
24	25 9. Name and Address of Curren		30]	10. Name and Address of New Registered	
			81 Name		
THE PRENTICE-HALL CORPORATION SYSTEM, INC.					
1201 HAYS ST. SUITE 105			82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
			83		
į iAi	LLAHASSEE FL 32301				
			84 City	F	85 Zip Code
11 Purcuant	to the provisions of Sections 607.050	2 and 607 1508 Florida Statute	s the above-named core		
office or r	egistered agent, or both, in the State	of Florida, Such change was at	ithorized by the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the ap-	pointment as registered
agent la	im f ami liar with, and accept the obliga	ations of, Section 607.0505, Flor	ida Statutes.		
SIGNATURE	Signature, typed or printed name of registered age	- AVCOL	Registered Agent signature requi	ired when reinstating) DATE	
12.	OF LICE RS AN		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	8	DELETE	1.1 TITLE	7.0011101107070711111010110111	Change Addition
NAME	WAKEFORD, STEVE	_	1.2 NAME		
STREET ADDRESS	1650 AIRPORT RD		1.3 STREET ADDRESS		
`	KENNESAW GA		1.4 City - ST - ZiP		
CITY-ST-ZIP TITLE	D D	DELETE	2.1 TiTLE		Change Addition
	JOURNO, ALBERT	and Steele	2.2 NAME		
NAME			1		
STREET ADDRESS	1650 AIRPORT RD.		2.3 STREET ADDRESS		i
- CITY-ST-ZIP	KENNESAW GA 30144	DELETE	2. 4 C/TY - S1 - Z/P		Change Addition
TITLE	DODET MICHEL	ר וונרנונ	3.1 TITLE		T Cuanão TT MODITION
NAME	DOREZ, MICHEL		3.2 NAME		
STREET ADDRESS	1650 AIRPORT RD.		3.3 STREET ADDRESS		
CITY-ST-ZIP	KENNESAW GA 30144	D. DEL ETC	3.4. CITY-ST-ZIP		Observa Addition
TITLE	P	L_J DELETE	4.1 TiTLE	~ 1.11.10	Change Addition
NAME	SHILLING, KENNETH		4. 2 NAME	Schilling	
STREET ADDRESS	1650 AIRPORT RO		4.5 STREET ADDITESS	7	,
CITY-ST-ZIP	KENNESAW GA	- Loreste	4.4 CITY - ST - ZIP	7	Distance Management
TITLE		DELETE	5.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Maddition
NAME			5.2 NAME	VERNER, SCHAFFER	
STREET ADDRESS			5 3 STREET ADDRESS	VERNER, SCHAFFER USO AIRDOUT RJ ENNESAW, GA 30144	
CITY-ST-ZIP			5.4 CITY - ST - ZIP	ENNESAW, GA 30144	
TITLE		DELETE	61 TITLE	,	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-SY-ZIP	_		6.4 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 supplimental 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 13 if changed, or or an attachment with an address.

FILED

May 19 1998 8:00am

Secretary of State