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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 447538

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FOX-MA	R PHOTOGRAPHY, INC.	(-)			 	AN DOBO BIBNI BIBNI BIR	### #### #############################	
Principal Place	of Business	Mailing Address				ili bibli bibil bibli bil		
8043 NW 167 ST SUITE A-7		6043 NW 167TH ST SUITE A-7			, ,			
MIAMI FL 33011 US	5	MIAMI FL 33015-4316 US			3. Date Incorporated or Qualified	3a. Date of	Last Report	
					03/12/1974	01/24/19	•	
2. Principal Place of Business		26. Mailing Address			4. FEI Númber 59-1533884		Applied For Not Applicat	
Suite, Apt. #, etc.		26 Suite, Apt. #, etc	4 1		1		.75 Additional	
22	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	27			5. Certificate of Status Desired	······	ee Required	
City & State	e '	City & State			6. Election Campaign Financing Trust Fund Contribution		5.00 May Be added to Fees	
Zip 24	Country 25	Zip 29	Country 30		This corporation has liability for Florida Statutes	or intangible tax ur	nder s. 199.032,	
24]	9. Name and Address of Curre		30		10. Name and Address of New F		,	
	, IRA A.		81	Name		-,		
10535 S.W. 109 COURT MIAMI FL 33176			82	Street Addre	ess (P.O. Box Number is Not Accept	able)		
MIA	WI FL 331/6		83				 _	
			84	City		85	Zip Code	_
	- 10 - 002 Ar	20 - 1007 1500 Ft-1-1 Oct.				FL	·	
office or re	to the provisions of Sections 607.091 egistered agent, or both, in the State	72 and 607.1508, Florida Statu Fof Florida, Such change was Intions of Section 807.0505. E	ites, the above authorized by locida Statutor	e-named corporati	oration submits this statement for the on's board of directors. I hereby acc	purpose of chan ept the appointm	ging its registered ent as registered	os t
SIGNATURE	are raining, with and accept the orals	gations of, Section borloss, F	HOI I DA STALLICE:	,.				ļ
12.	Signature, typical or printed havin of registered as		13.	ent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFF	DATE	CTOPS IN 12	
TOLE	PD	OFFICERS AND DIRECTORS DELETE			ADDITIONS/CITATIONS TO OTT		hange Addit	ion
NAME	FOX (IRA A.)		1.1 TITLE 1.2 NAME					İ
STREET ADDRESS	10535 SW 109 CT.		1.3 STREET ADDRESS					ĺ
City+St-7iP	MIAMI FL		1.4 CITY-ST-ZIP					
TiTLE	ST DELETE		2.1 TITLE			□ c	hange 🔲 Addit	ion
NAME	MAYNARD, MARK W.							
STREET ADDRESS	10535 SW 109 CT.		2 3 STREET	ADDRESS				
CHTY-ST-ZIF	MIAMI FL		2 4 CITY-	ST-ZIP				
TITLE	[] DELETE		3 1 TITLE			□¢	hange 🛄 Addil	ion
NAME.			32 NAME					
STREET AODRESS			3 3 STREET					
CITY+S1+ZIP		Попет	3.4. CITY -	ST-ZIP				
TITLE		DELETE	4.1 THILE			[] U	hange Addit	.ion
NAME			4. 2 NAME					
STREET ADORESS			4.3 STREET	1				
CHY-ST-ZIP	DELETE		4.4 CITY-3	ST-ZIP			hange	lion
TITLE	□ DELE1€		51 TITLE				nange Li Muuli	1011
NAME Proper Application			5.2 NAME	ADDDECC				[
STREET ADDRESS			5.3 STREE	1				
CITY - ST - ZIF TITLE		DELFTE	5.4 CITY - 5 6.1 TiTLE	SI-ZIP			hange Addit	tion
NAME		L offile	6.2 NAME			<u>.</u>		.

14. I do 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 of the processor of 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 9 yin anachment with an address.

6.3 STREET ADORESS 6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/97

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FILED

Feb 04 1997 8:00am

Secretary of State

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