FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **M75932** **(7)**

1. Corporation Name

FOTOKINA OF FLORIDA, INC.

Principal Place of Business

2315 NW 107 AVE
P.O. BOX 83
MIAMI FL 33172

Mailing Address

2315 NW 107 AVE
P.O. BOX 83
MIAMI FL 33172

3. Date Incorporated or Qualified: **04/11/1988**

3a. Date of Last Report: **04/03/1995**

4. FEI Number: **65-0049988** ☐ 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 County 30

9. Name and Address of Current Registered Agent

SANDBERG, NEAL L.
1492 SOUTH MIAMI AVENUE
MIAMI FL 33130

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 Section 617.1702 and 617.1908, 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 617.0501, Florida Statutes.

SIGNATURE

DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1 TITLE	☐ Change ☐ Addition
NAME	NANDWANI, UTTAM C.		1 NAME	
STREET ADDRESS	2315 NW 107 AVE B-16		1 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL		1 CITY, ST, ZIP	
TITLE	S	☐ DELETE	2 TITLE	☐ Change ☐ Addition
NAME	NANDWANI, RAM		2 NAME	
STREET ADDRESS	2315 NW 107 AVE. B-16		2 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL 33172		2 CITY, ST, ZIP	
TITLE	T	☐ DELETE	3 TITLE	☐ Change ☐ Addition
NAME	CHUGANI, MURLI		3 NAME	
STREET ADDRESS	2315 NW 107 AVE. B-16		3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL 33172		3 CITY, ST, ZIP	
TITLE	M	☐ DELETE	4 TITLE	☐ Change ☐ Addition
NAME	CATTANI, ALMO		4 NAME	
STREET ADDRESS	1001 NW 127 PLACE		4 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL 33182		4 CITY, ST, ZIP	
TITLE		☐ DELETE	5 TITLE	☐ Change ☐ Addition
NAME			5 NAME	
STREET ADDRESS			5 STREET ADDRESS	
CITY, ST, ZIP			5 CITY, ST, ZIP	
TITLE		☐ DELETE	6 TITLE	☐ Change ☐ Addition
NAME			6 NAME	
STREET ADDRESS			6 STREET ADDRESS	
CITY, ST, ZIP			6 CITY, ST, ZIP	

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is true and accurate; that this electronic 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: UTTAM C. NANDWANI 3/8/96 (305) 4779575

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