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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N33791** (7)

1. Corporation Name

PALM BEACH PHOTOGRAPHIC CENTRE, INC.

Principal Place of Business

**55 N.E. 2ND AVE
DELRAY BEACH FL 33444
US**

Mailing Address

**55 N. E. 2ND AVE
DELRAY BEACH FL 33444
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Name and Address of Current Registered Agent

**NEJAME, FATIMA
55 N.E. 2ND AVE.
DELRAY BEACH FL 33444**

3. Date Incorporated or Qualified

08/18/1989

4. FEI Number

59-2801420

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**

7. Is this nonprofit corporation a homeowners association?

☐

Yes

☐

No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

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 Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

STD
NAME NEJAME, ARTHUR
STREET ADDRESS 2310 E SILVER PALM RD.
CITY - ST - ZIP BOCA RATON FL

TITLE ☐ DELETE

PD
NAME NEJAME, FATIMA
STREET ADDRESS 2310 E SILVER PALM RD.
CITY - ST - ZIP BOCA RATON FL

TITLE ☐ DELETE

D
NAME SEGEL, FLOYD
STREET ADDRESS 231 BRADLEY PLACE
CITY - ST - ZIP PALM BEACH FL

TITLE ☐ DELETE

D
NAME MCVAY, JAN
STREET ADDRESS 1281 ROYAL PALM WAY
CITY - ST - ZIP BOCA RATON FL

TITLE ☐ DELETE

CD
NAME FRANKEL, FRED
STREET ADDRESS 6853 SW 18 ST #209
CITY - ST - ZIP BOCA RATON FL

PRESIDENT

TITLE ☐ DELETE

SD
NAME NORMAN, JAMES
STREET ADDRESS 300 E BROWARD BLVD
CITY - ST - ZIP FORT LAUDERDALE FL

SECRETARY

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

Dr. JAY Alperin
330 Lowson Blvd
Delray Bch Fl 33445

2.1 TITLE ☐ Change ☒ Addition

Trudi Mitchell
2598 NW 27 Street
Boca Raton 33434

3.1 TITLE ☐ Change ☒ Addition

Sandy Simon
555 S. Federal
Delray Beach Fl 33483

4.1 TITLE ☐ Change ☒ Addition

MICHAEL GREENE
9610 SEA TURTLE DR
PLANTATION, FL 33324

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

5/1/98

CR2E037 (10/97)