

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED
02 MAY 28 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N33791

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

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/18/1989

5. FEI Number

59-2801420

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	NEJAME, ARTHUR	2310 E SILVER PALM RD.	BOCA RATON FL
D	NEJAME, FATIMA	2310 E SILVER PALM RD.	BOCA RATON FL
CD	GREEN, MICHAEL	9610 SEA TURTLE DRIVE	PLANTATION FL 33324
D	MCVAY, JAN	1281 ROYAL PALM WAY	BOCA RATON FL
D	FRANKEL, FRED	6853 SW 18 ST #209	BOCA RATON FL
SD	NORMAN, JAMES	300 E BROWARD BLVD	FORT LAUDERDALE FL

8. Name and Address of Current Registered Agent

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

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

800005754368--0

06/11/02-01106-003

****306.25 ****306.25

1E040 (8/01)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

F. Ne Jame

REGISTERED AGENT MUST SIGN

Date

4/7/2002

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

F. Ne Jame FATIMA NEJAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/7/2002

Daytime Phone #

561269797

Additional Directors

CD	Brown, Christopher J.	218 N. W. Ninth Street	Delray Beach, FL
D	Everett, C. Todd	2455 Lindell Blvd., #3304	Delray Beach, FL
D	Healy-Golembe, Patricia	19 Andrews Avenue	Delray Beach, FL
SD	Greene, Michael	9610 Sea Turtle Drive	Plantation, FL
D	Kahl, Malcolm	2929 E. Commercial Blvd., Ste 702	Fort Lauderdale, FL
VD	Kravit, Michael	902 Clintmore Road, Ste 136	Boca Raton, FL
D	McGloin, Richard	2275 N Swinton Avenue	Delray Beach FL
D	Segar, Jeff	175 W Alexander Palm Rd	Boca Raton FL
D	Russell, Beth	2751 South Dixie Highway	West Palm Beach, FL