2007 FOR PROFIT CORPORATION
ANNUAL REPORT ·

DOCUMENT # P94000021703

1. Entity Name
ROBERT LINO PHOTOGRAPHY, INC.

Principal Place of Business	Mailing Address
3620 SW 127TH AVE MIAMI, FL 33125	3620 SW 127TH AVE MIAMI, FL 33125

DO NOT WRITE IN THIS SPACE

03242007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0506533	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GARCIA, WILLIAM ESQ.
710 SOUTH DIXIE HIGHWAY
CORAL GABLES, FL 33146

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

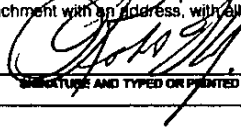**FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS	
TITLE	D	
NAME	HERNANDEZ, ROBERTO	
STREET ADDRESS	6341 CORAL WAY	
CITY-ST-ZIP	MIAMI, FL 33155	
TITLE		
NAME		
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04/27/07-80018-024 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____   4/07   JOS 441-1188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #