AUG-19-1996 16:52 P.01

CORPORATION ANNUAL REPORT 1995

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

DOCUMENT # P95000010029

1. Corporation Name
SUCCESSFUL IMAGES, INC.

Principal Place of Business	Mailing Address
19 NE 4TH STREET FT LAUDERDALE FL 33301	19 NE 4TH STREET FT. LAUDERDALE FL, 33301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: N/A
3a. Date of Last Report:

2. Principal Place of Business 21: 19 NE 4TH ST.
Suite, Apt. #, etc. 22:
City & State 23: FT LAUDERDALE, FL
Zip 24: 33301 Country 25: BROWARD

2a. Mailing Address 26: 19 NE 4TH ST.
Suite, Apt. #, etc. 27:
City & State 28: FT. LAUDERDALE FL
Zip 29: 33301 Country 30: BROWARD

4. FEI Number: 65-0585065 ☐ 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

9. Name and Address of Current Registered Agent

RUCHEL LOUIS
19 NE 4TH STREET
FT. LAUDERDALE FL 33301

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE X _____ 08/20/96
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE		1.1 TITLE	VICE PRESIDENT	☐ Change ☒ Addition
NAME		1.2 NAME	KYLE FARLEY	
STREET ADDRESS		1.3 STREET ADDRESS	19 NE 4TH STREET	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE		2.1 TITLE	SECRETARY	☐ Change ☒ Addition
NAME		2.2 NAME	RHONDA RITCHIE	
STREET ADDRESS		2.3 STREET ADDRESS	19 NE 4TH STREET	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	FT. LAUDERDALE FL 33301	
TITLE		3.1 TITLE	TREASURER	☐ Change ☒ Addition
NAME		3.2 NAME	SERGIO GONZALEZ	
STREET ADDRESS		3.3 STREET ADDRESS	19 NE 4TH STREET	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE	500001930205	☐ Change ☐ Addition
NAME		6.2 NAME	-08/23/96--01004--005	
STREET ADDRESS		6.3 STREET ADDRESS	***225.00	
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

8/23/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X _____ 08/20/96 954 463 3200