

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000033258

**Entity Name:** GLORIA RUTH PHOTOGRAPHY, INC.

**FILED**  
**Apr 18, 2013**  
**Secretary of State**  
**CC7644738356**

**Current Principal Place of Business:**

2700 S. COMMERCE PKWY  
STE 309  
WESTON, FL 33331

**Current Mailing Address:**

2700 S. COMMERCE PKWY  
STE 309  
WESTON, FL 33331

**FEI Number: 45-5084108**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MACKINNON, GLORIA  
2700 S COMMERCE PKWY  
STE 309  
WESTON, FL 33331 US

*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.*

**SIGNATURE: GLORIA MACKINNON**

**04/18/2013**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MACKINNON, GLORIA  
Address 2700 S COMMERCE PKWY, STE #309  
City-State-Zip: WESTON FL 33331

Title VP  
Name MACKINNON, GLORIA  
Address 2700 S COMMERCE PKWY, STE #309  
City-State-Zip: WESTON FL 33331

Title SEC  
Name MACKINNON, GLORIA  
Address 2700 S COMMERCE PKWY, STE #309  
City-State-Zip: WESTON FL 33331

Title DIR  
Name MACKINNON, GLORIA  
Address 2700 S COMMERCE PKWY, STE #309  
City-State-Zip: WESTON FL 33331

Title TRES  
Name MACKINNON, GLORIA  
Address 2700 S COMMERCE PKWY, STE #309  
City-State-Zip: WESTON FL 33331

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: GLORIA MACKINNON**

**PRESIDENT**

**04/18/2013**

Electronic Signature of Signing Officer/Director Detail

Date