

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000030470

Entity Name: JULIANA BO PHOTOGRAPHY, INC.**Current Principal Place of Business:**224 E. COMMERCIAL BL STE 200
LAUDERDALE BY THE SEA, FL 33308**Current Mailing Address:**PO BOX 480360
FORT LAUDERDALE, FL 33348**FEI Number:** 46-5317459**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

| | |
|-----------------|-------------------------|
| Title | PRES |
| Name | BOGASH, ULIANA |
| Address | PO BOX 480360 |
| City-State-Zip: | FT. LAUDERDALE FL 33348 |

| | |
|-----------------|-------------------------|
| Title | SEC |
| Name | BOGASH, ULIANA |
| Address | PO BOX 480360 |
| City-State-Zip: | FT. LAUDERDALE FL 33348 |

| | |
|-----------------|-------------------------|
| Title | TRES |
| Name | BOGASH, ULIANA |
| Address | PO BOX 480360 |
| City-State-Zip: | FT. LAUDERDALE FL 33348 |

| | |
|-----------------|-------------------------|
| Title | DIR |
| Name | BOGASH, ULIANA |
| Address | PO BOX 480360 |
| City-State-Zip: | FT. LAUDERDALE FL 33348 |

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: ULIANA BOGASH**PRESIDENT****08/03/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date