

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED  
Apr 02 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 440269

(9)

1. Corporation Name

ED SLATER PHOTOGRAPHY, INC.

Principal Place of Business

3601 W. COMMERCIAL BLVD #33  
FT. LAUDERDALE FL 33309

Mailing Address

3601 W. COMMERCIAL BLVD #33  
FT. LAUDERDALE FL 33309-3321



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 3601 NW 75 TERR		26 3601 NW 75 TERR		11/26/1973	05/01/1996
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		59-1525885	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 LAUDERHILL, FL		28 LAUDERHILL, FL		<input type="checkbox"/>	
Zip	Country	Zip	Country	6. Election Campaign Financing	\$5.00 May Be Added to Fees
24 33319	25 BROWARD	29 33319	30 BROWARD	Trust Fund Contribution	<input type="checkbox"/>
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
SLATER, EDWARD				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<del>3601 W COMMERCIAL BLVD #33</del>				10. Name and Address of New Registered Agent	
<del>FT. LAUDERDALE FL 33309</del>				81 Name	
3601 NW 75 TERR				82 Street Address (P.O. Box Number is Not Acceptable)	
LAUDERHILL, FL				83	
33319				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

Signature, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	SLATER, (EDWARD ALLAN)			1.2 NAME			
STREET ADDRESS	3601 N W 75 AVENUE TERR			1.3 STREET ADDRESS			
CITY-ST-ZIP	LAUDERHILL, FL 00000 33319			1.4 CITY-ST-ZIP			
TITLE	SVD	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	SLATER, (JUDITH)			2.2 NAME			
STREET ADDRESS	3601 N W 75 AVENUE TERR			2.3 STREET ADDRESS			
CITY-ST-ZIP	LAUDERHILL, FL 00000 33319			2.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Edward Slater*

*3/27/97 884-7420 PCC*

CR2E034 (9/96)