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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # Corporation Name

A & P PHOTO SHOP, INC.

Mailing Address Principal Place of Business % ALBERT GALLANTHEN % ALBERT GALLANTHEN 1220 RIVERLAND RD. 1220 RIVERLAND RD. FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312 3a. Date of Last Report 3. Date Incorporated or Qualified 07/28/1995 10/18/1977 Applied For 4 FELN.iniber 2a. Mailing Address 2. Principal Place of Business 59-1777488 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired \Box Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State \Box Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Ζφ Country Zio Yas No Florida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) **GALLANTHEN, PEGGY JEAN** 4701 N.W. 6TH STREET 83 **PLANTATION FL 33317** Zip Code 84 City FL 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE ners taking ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Add tion Change DELF1E 1 1 TIFLE TITLE GALLANTHEN, ALBERT, JR. 1.2 NAME NAME 4701 N.W. 6TH STREET 1.3 STREET ADDRESS STREET ADDRESS PLANTATION FL 1.4 Cit (-SI - ZiP City-St-ZiP Addition ☐ Change DELETE 2 1 THILE THLE GALLANTHEN, PEGGY JEAN 2.2 NAME NAME 2.3 STREET ADDRESS 4701 N.W. 6TH STREET STREET ADDRESS 2.4 CITY - ST. ZIP PLANTATION FL CITY - ST - ZIP Change Addition DELETE 3 1 10 LF THLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 3.4 CITY - \$1 - ZIP CITY - ST - ZIF Change ☐ Addition DELE 1E 4 1 TITLE 4.2 NAME NAME

64 CHTY - ST- ZIP CHTV - S1 - ZIP 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 armual 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 a chment with an address

4.3 STHEET ADDRESS

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TITLE

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DELETE

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(954) 58767/3

Addition

Addition

CR2E034 (12/95)