

**ANNUAL REPORT
1995**

Thomas G. Weaver
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 APR 18 PM 6:08

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # 650318 (9)

1. Corporation Name
PHOTOGRAPHY BY MOYA, INC.

Principal Place of Business Mailing Address
**4212 SOUTH DIXIE HIGHWAY 4212 SOUTH DIXIE HIGHWAY
WEST PALM BEACH FL 33405 WEST PALM BEACH FL 33405**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report
01/01/1980 04/13/1994

4. FEI Number Applied for
59-1962759 Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Election Campaign Financing \$5.00 May Be
Trust Fund Contribution Added to Fees

8. This corporation has liability for intangible tax under § 199.010,
Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 26
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27
City & State City & State
23 28
Country Country
24 25 29 30 Zip

9. Name and Address of Current Registered Agent

**MOYA, MIGUEL F., JR.
4212 SOUTH DIXIE HIGHWAY
WEST PALM BEACH FL 33405**

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 to the office specified 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 hereby accepting the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *Guillermo E. Suarez*

4/15/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
101	DP MOYA, MIGUEL F JR 981 BRIARWOOD DR W PALM BCH, FL 00000	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
102	STD MOYA, YOLANDA P 981 BRIARWOOD DR W PALM BCH, FL 00000	12 NAME	
103		13 STREET ADDRESS	
104		14 CITY, ST, ZIP	
105		21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
106		22 NAME	
107		23 STREET ADDRESS	
108		24 CITY, ST, ZIP	
109		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
110		32 NAME	
111		33 STREET ADDRESS	
112		34 CITY, ST, ZIP	
113		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
114		42 NAME	
115		43 STREET ADDRESS	
116		44 CITY, ST, ZIP	
117		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
118		52 NAME	
119		53 STREET ADDRESS	
120		54 CITY, ST, ZIP	
121		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
122		62 NAME	
123		63 STREET ADDRESS	
124		64 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(6)(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. I will appear at a meeting of the corporation or the board of directors or another organization to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Check 12 or Check 13 if changed, or on an attachment to this report.

SIGNATURE: *Guillermo E. Suarez*
SIGNATURE AND TYPED OR PRINTED NAME OF BOILING OFFICER OR DIRECTOR

4/14/95 (407)K328457