2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 664481

Title:

Name: Address:

City-St-Zip:

Mar 05, 2002 8:00 AM Secretary of State

Entity Name: AMERICAN PHOTO, INC. **Current Principal Place of Business: New Principal Place of Business:** 2200 NW 93RD AVE MIAMI, FL 33172 **Current Mailing Address: New Mailing Address:** 2200 NW 93RD AVE MIAMI, FL 33172 FEI Number: 59-2005552 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TERAN, RICARDO TERAN, RICARDO 104 SW 13TH ST 2200 N.W. 93RD AVE MIAMI, FL 33130 US MIAMI, FL 337172 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: RICARDO TERAN 03/05/2002 Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition TERAN, ROBERTO J B. Name: Name: 251 CRANDON BLVD. #227 Address: Address: City-St-Zip: KEY BISCAYNE, FL City-St-Zip: Title: Title: (X) Change () Addition () Delete TERAN, RICARDO J., Name: Name: TERAN, RICARDO J., 1798 N.W. 82ND AVENUE 2200 N. W. 93RD AVE Address: Address: MIAMI, FL 33126 MIAMI, FL 33172 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition TERAN, ROBERTO S JR Name: Name: 6449 N.W. 109 Address: Address: City-St-Zip: MIAMI, FL 33178 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: MARIA E. MORIARTY ٧ 03/05/2002

() Delete

MORIARTY, MARIA E,

KEY BISCAYNE, FL

295 WEST ENID DRIVE

() Change () Addition