2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 23, 2006 08:00 AN Secretary of State

1. Entity Nan	MENT # 668253 EY PHOTOGRAPHY, INC.					Sec	cretary (of State
Principal Place 6860 S.W. 7 MIAMI, FL 3		Mailing Address 6860 S.W. 75 TERR MIAMI, FL 33143 US						
DO NOT WRITE IN THIS SPAC					01132006 4. Fet Numb 59-199		CR2E034 (11/	Applied For Not Applicable Additional
6. Name and Address of Current Registered Agent STECKLEY, WILLIAM M 6860 S.W. 75 TERR MIAMI, FL 33143			DO NOT WRITE IN THIS SPACE					
8. 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. I am familiar with, and accept the obligations of registered agent. Signature Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE								
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				\$5.0 Adde	00 May Be ed to Fees			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIE PD STECKLEY, WILLIAM M. 6860 S.W. 75 TERR MIAMI, FL 33143	RECTORS				ñooodo)394190 -80051-021	
THRE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ST STECKLEY, WILLIAM M. 6860 S.W. 75 TERR MIAMI, FL 33143					1117637Ub*	-8UU51-U21	150.00
NAME STREET ADDRESS CITY-ST-ZIP						NOT W		
NAME STREET ADDRESS CITY-ST-ZIP					IN	THIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS City-ST-ZIP								
12. I hereby of indicated of the corchanged.	certify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empower or on an attachment with an address, with	s filing does not qualify for the ex e and accurate and that my signe red to execute this report as requ all other like empowered.	emptions conta ture shall have ired by Chapte	ained the ser 607,	in Chapter 119 ame legal effec Florida Statute	9, Florida Statutes. I of as if made under o es, and that my name	further certify that the sath; that I am an off appears in Block 1	ne information icer or director 0 or Block 11 if