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

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT #



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F93000003322 (5)

FOX PHOTO, INC.		
Principal Place of Business	Mailing Address	<u> </u>
1706 WASHINGTON AVE. C/O TAX DEPT. ST. LOUIS MO 69103	1706 WASHINGTON AVE. C/O TAX DEPT. ST. LOUIS MO 63103	

FILED May 20 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/20/1993 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 01-0421712 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Ζιρ Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. Street Address (P.O. Box Number is Not Acceptable) 82 PLANTATION FL 33324 83 City Zip Code 11. Pursuant to the provisions of Sections 607.05:02 and 607.15:08, 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 607.05:05, Florida Statutes. SIGNATURE Signature, typical or profind name of registered agent and like if applicable (NOTE: Registered Agent signature required when reinstating) (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS Vice President Addition DELETE Change 1.1 TITLE TITLE Ann B. Dolle ESSMAN, ALYN V 1.2 NAME NAME #3 VOUGA LANE 1133 Dunston Drive STREET ADDRESS 1.3 STREET ADDRESS **FRONTENAC MO** MO 63140 1.4 CITY-ST-ZIP CITY+ST-ZIP Change Addition DELETE 2.1 TITLE TITLE KERSCHER, ALAN 22 NAME NAME 9033 CLAYTON RD STREET ADDRESS 2.3 STREET ADDRESS ST LOUIS MO 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 3.1 TITLE TITLE DE BUHR, TED 3.2 NAME NAME 14313 OPEN MEADOW COURT 3.3 STREET ADDRESS STREET ADDRESS CHESTERFIELD MO CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE ☐ Change Addition TITLE PHAAG, JOYCE 4. 2 NAME NAME 137 TENNYSON WAY 4.3 STREET ADDRESS STREET ADDRESS **PITTSFORD NY** 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 5.1 TITLE TITLE GREENE, JESSEE J JR 5.2 NAME NAME 445 PHEASANT RUN 5.3 STREET ADDRESS STREET ADDRESS WEBSTER NY 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition AS DELETE 6.1 TITLE TITLE PEARLMAN, MICHAEL 6.2 NAME NAME **8 PIN HOOK LANE** 6.3 STREET AUDRESS STREET ADDRESS PITTSFORD NY 64 CITY-ST-7IP CITY-\$1-ZIP

14. I hereby certify that the information supplied with this filing doosnot quality for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is trule 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 of the receiver of trustes underweat to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation of the re-Block 12 or Block 13 if changed,