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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F98000007100

1. Corporation Name

FOTOTAG, INC.

Principal	Place of	Business	

Mailing Address

1830 PENN ST MELBOURNE FL 32904

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2. Principal Place of Business

1830 PENN ST MELBOURNE FL 32904

2a. Mailing Address

26

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90063 006 ***158.75



DO NOT WRITE IN THIS SPACE

Applied For

Not Applicable

3. Date Incorporated or Qualifed

12/30/1998

59-3464867

4. FEI Number

	t. #, etc. Suite, Apt. #, etc.				5. Certifcate of Status Desired	•	Additional		
22	27					Fee Re	quired		
City & Stat	e -	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	- 1		
Zip	Country	Zip	Country		8. This corporation owes the current year	intangible			
24	25	29 30			Personal Property Tax.	∐Yes	□No		
	9. Name and Address of Current	11	·		10. Name and Address of New Registers	d Agent	_		
			81	Name					
DAWLEY, STUART P 1830 PENN ST MELBOURNE FL 32904									
			82	82 Street Address (P.O. Box Number is Not Acceptable)					
			83	83					
			"						
			84	City	· F	85 Zip (Code		
						 1			
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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE	Signature, typed or printed name of registered agent	·/ · · · / · · · ·	egistered Agen	t signature req	uired when reinstating) DATE		 }		
12.	OFFICERS AND		13.	,	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition		
NAME	RIDGE, GAVIN C		1.2 NAME						
STREET ADDRESS			1.3 STREET ADDRESS				ì		
CITY-ST-ZIP	MELBOURNE FL 32904		1.4 CITY-S1				ļ		
TITLE			2.1 TITLE			☐ Change	Addition		
NAME	WEINRESS, JEFFERY B		2.2 NAME	- 1			,		
STREET ADDRESS	1830 PENN ST		2.3 STREET	ADDRESS					
CITY-ST-ZIP	MELBOURNE FL 32904		2. 4 CITY-S	T-ZIP					
TITLE	ASD	DELETE	3.1 TITLE		The second secon	☐ Change	☐ Addition		
NAME	DAWLEY, STUART P		3.2 NAME						
STREET ADDRESS	1830 PENN ST		3.3 STREET	ADDRESS			ì		
CITY-ST-ZIP	MELBOURNE FL 32904		3.4. CITY-S				ļ		
TITLE	SD SD	DELETE	4.1 TITLE			Change	Addition		
	RIORDAN, DON F JR		4. 2 NAME		•		ļ		
STREET ADDRESS	1830 PENN ST		4.3 STREET	ADDRESS					
CITY-ST-ZIP	MELBOURNE FL 32904		4.4 CITY-ST				1		
TITLE	n		5.1 TITLE	-		▼ Change	☐ Addition		
	HALL, SALLY H	<u> </u>	5.2 NAME	1	1		ļ		
STREET ADORESS	1830 PENN ST		5.3 STREET	ADDRESS	Ball, Sally H				
CITY-ST-ZIP	MELBOURNE FL 32904		5.4 CITY-S1	r-zip					
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition		
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET	ADORESS			İ		
CITY-ST-ZIP			6.4 CITY-S1	T-ZIP					

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

SIGNATURE: