FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

(2)

DOCUMENT # G92713 (8) 1. Corporation Name PHOTO DISCOUNTERS, INC.													
incinal Place (of Bueiness		Ma	iling Address				<u>-</u>) ((111 1) (030) ()	800 (011 010 11 1	IIIII URBA U	0 81 010 11 1	11031 (0.01
AOI BISCAYNE BOULEVARD Mailing Address 401 BISCAYNE BOULEVARD 401 BISCAYNE BOULEVARD													
SUITE S-130			;	Suite S-130	-								
Miami FL 331 US	132			Miami Fl 33132 Us				3. Date Incorporated	or Qualified		te of Last		
00								03/23/1984			08/04/		
Principal Pla	ce of Busin	ess		Mailing Address				4. FEI Number 59-276181	n		-	Applie Not A	o For pplicable
C := A = 4	- cho		26	Suite, Apt. #, etc.							\$8.7	5 Add	
Suite, Apt #	, etc.		27	Colle, Apr. #, ctc.				5. Certificate of Statu	s Desired		Fe	e Requi	red
City & State				City & State				6. Election Campaign	_		· -	00 ма	•
			28					Trust Fund Contrib				ded to F	
Ziρ		Country	-	Ζιρ	30 Cou	intry		This corporation has Florida Statutes		rintangible is 🔲 No	tax under	\$ 199.	J32,
	0 Name	25 and Address of Curr	ent Regis	tered Agent	[30]	1		10. Name and Addre	-		d Agent		
	3. Num	and Addition of Con-				81 N	Name						
ALEJAN	DRO FER	NANDEZ				82 S	Street Addre	ess (P.O. Box Number is	Not Accepta	able)			
		OULEVARD											
SUITE S	3-130					83							
MIAM) FL 33132							City			F	85	Zip Coo	je
or regulars	od saent Ai	r both in the State of Hi	onda Sucr	i coange was aumor	IZEU DV THE I	ove-nan corpora	med corporation's boar	ation submits this statement of directors. I hereby ac	ont for the pocept the ap	urpose of o	as registe	ed ager	it. I am
or registere familiar with GNATURE	ed agent, or h, and acce	ions of Sections 607.05 r both, in the State of Fli ept the obligations of, Se derprined name of registered e	ection 607.	0505, Florida Statute	NOTE: Registered	COLPOIA	ation 3 book	d when reinstating)		DATE			
or registere familiar with GNATURE	ed agent, of h, and acce Signature, types	r both, in the State of Fi ept the obligations of, Se	onda. Sucrection 607.	o505, Florida Statute applicable (f	NOTE: Registered	d Agont sig	ation 3 book	d of birectors, thorough		DATE	ND DIREC	TORS II	N 12
or registere familiar with GNATURE	ed agent, or h, and acce Signature, types	r both, in the State of File opt the obligations of, Se or printed name of registered as OFFICERS A	onda. Sucrection 607.	o505, Florida Statute	NOTE: Registered	d Agoni sig	ation 3 book	d when reinstating)		DATE		TORS II	N 12
or registers familiar with GNATURE	ed agent, or h, and acce Signature, types PD MC AI	r both, in the State of Filepot the obligations of, So for printed name of registered as OFFICERS /	onda. Sucrection 607.	o505, Florida Statute applicable (f	NOTE: Registered 13. 111	d Agont sig TITLE IAME	gnature requires	d when reinstating)		DATE	ND DIREC	TORS II	N 12
or registere familiar with GNATURE.	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	o505, Florida Statute applicable (f	NOTE: Registered 13. 1 11 1.2 N 1.3 S	d Agoni sig	ignature required	d when reinstating)		DATE	ND DIREC	TORS II	N 12
or registere familiar with GNATURE	Signature, typed PD MC AI CLIEV	r both, in the State of Filepot the obligations of, So for printed name of registered as OFFICERS /	onda. Sucrection 607.	o505, Florida Statute applicable (f	NOTE: Registered 13. 1 11 1.2 N 1.3 S	d Agent significant of the signi	ignature required	d when reinstating)		DATE	ND DIREC	TORS II	N 12 Addition
or registere familiar with GNATURE LEF ME REEL ADDRESS Y-ST-ZIP	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	opplicable (CTORS)	13. 111 12.N 1.3.\$ 1.4.0 2.11	d Agent significant of the signi	ignature required	d when reinstating)		DATE	ND DIREC	TORS II	N 12 Addition
or registere familiar with GNATURE LEF ME REE1 ADDRESS Y-ST-ZIP LEF ME	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	opplicable (CTORS)	13. 1 11 1.2 N 1.3 S 1.4 C 2.1 1 2.2 M 2.3 S	d Agont signification of the control	gnature required DORESS DORESS	d when reinstating)		DATE	ND DIREC	TORS II	N 12 Addition
or registere familiar with GNATURE LE ME REEL ADDRESS Y-ST-ZIP LE ME REFT ADDRESS Y-ST-ZIP	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	OSOS, Florida Statute Applicable (FOTORS) DELETE	NOTE: Registered 13. 111 12N 13.\$ 1.40 2.11 22.6 23.\$ 24.6	d Agont signification of the control	gnature required DORESS DORESS	d when reinstating)		DATE	ND DIRECT Change	TORS II	N 12 Addition Addition
or registere familiar with GNATURE	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	opplicable (CTORS)	VOTE: Registered 13. 111 12N 13.\$ 1.40 2.11 22M 23.\$ 24.0 3.1	DOLPOTA THLE IAME STREET AD CITY-ST-2 THLE IAME STREET AD CITY-ST-2 THLE	gnature required DORESS DORESS	d when reinstating)		DATE	ND DIREC	TORS II	N 12 Addition Addition
or registere familiar with GNATURE LE ME REELADDRESS Y-ST-ZIP LE ME REETADDRESS Y-ST-ZIP LE ME REETADDRESS ME ME ME ME ME ME	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	OSOS, Florida Statute Applicable (FOTORS) DELETE	NOTE: Registered 13. 111 12N 13S 14C 2.1' 22M 23S 24C 311 32M	d Agont signification of the control	gnature required DORESS ZIP DORESS ZIP	d when reinstating)		DATE	ND DIRECT Change	TORS II	N 12 Addition Addition
or registere familiar with GNATURE LE ME REELI ADDRESS Y-ST-ZIP LE ME REELI ADDRESS (Y-ST-ZIP LE ME REELI ADDRESS	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	OSOS, Florida Statute Applicable (FOTORS) DELETE	VOTE: Registered 13. 1 11 1.2N 1.3S 1.4C 2.1' 2.2M 2.3S 2.4C 3.1 3.2M 3.3.4	d Agoni signification of the control	gnature required DORESS ZIP DORESS ZIP	d when reinstating)		DATE	ND DIRECT Chans	TORS II	Addition Addition
or registere familiar with GNATURE LE ME ME MEELI ADDRESS Y-ST-ZIP LE MEET ADDRESS Y-ST-ZIP LE ME ME MEELI ADDRESS Y-ST-ZIP LE ME ME ME MEELI ADDRESS MEELI MEELI ADDRESS MEELI MEEL	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	OSOS, Florida Statute Applicable (FOTORS) DELETE	VOTE: Registered 13. 1 11 1.2N 1.3S 1.40 2.11 2.2M 2.3S 2.40 3.1 3.2M 3.3.3 3.40	DATE OF THE CONTROL O	gnature required DORESS ZIP DORESS ZIP	d when reinstating)		DATE	ND DIRECT Change	TORS II	Addition Addition
or registere familiar with GNATURE LE ME REELI ADDRESS IY-ST-ZIP LE ME	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	O505, Florida Statute OTORS DELETE DELETE	VOTE: Registered 13. 111 12N 1.3S 1.40 2.11 22M 23S 24C 3.11 32M 3.3. 3.41 4.1	DITLE IAME STREET AD CITY-ST-2 TITLE IAME STREET AD CITY-ST-2 TITLE VAME STREET AL CITY-ST-2 CITY-ST-2 CITY-ST-2	gnature required DORESS ZIP DORESS ZIP	d when reinstating)		DATE	ND DIRECT Chans	TORS II	Addition Addition
or registere familiar with GNATURE LE ME ME RELI ADDRESS Y-ST-ZIP LE ME ME REST ADDRESS IY-ST-ZIP LE ME RELI ADDRESS IY-ST-ZIP LE ME ME RELI ADDRESS IY-ST-ZIP LE ME ME RELI ADDRESS IY-ST-ZIP LE ME ME ME ME ME ME	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	O505, Florida Statute OTORS DELETE DELETE	NOTE: Registered 13. 111 12N 13S 140 2.1 22h 23S 240 311 32N 33. 341 41 421	DAME DITLE IAME STREET AD CITY-ST-2 TITLE VAME STREET AD CITY-ST-2 TITLE VAME STREET AD CITY-ST-2 TITLE VAME STREET AD CITY-ST-2 TITLE NAME STREET AD CITY-ST-2 TITLE NAME STREET AD STREET AD CITY-ST-2 STREET AD CITY-ST-2 STREET AD	gnature required DORESS ZIP DORESS ZIP DORESS ZIP	d when reinstating)		DATE	ND DIRECT Chans	TORS II	Addition Addition
or registere familiar with GINATURE LE ME REEL ADDRESS Y-ST-ZIP LE ME REEL ADDRESS IY-ST-ZIP LE ME ME REEL ADDRESS IY-ST-ZIP	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	DELETE DELETE	22 NOTE: Registered 13. 111 12 N 1.3 S 1.4 C 2.1 22 h 23 S 2.4 C 3.1 3.2 h 3.3 3.4 (4.1 4.2 t 4.3 S 4.4 d 4.4 d	HADDEN SECONDO OF SECONDO OO SECONDO OF SECO	gnature required DORESS ZIP DORESS ZIP DORESS ZIP	d when reinstating)		DATE	ND DIRECT Chan	TORS II	Addition Addition
or registere familiar with GINATURE	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	O505, Florida Statute OTORS DELETE DELETE	NOTE: Registered 13. 111 12N 13S 140 2.1 22h 23S 240 311 32N 33. 340 41 421 433 444	DAME TITLE IAME STREET AD CITY-ST-2 TITLE VAME STREET AD CITY-ST-2 TITLE NAME STREET AL CITY-ST-1 TITLE NAME STREET AC CITY-ST-1 TITLE	gnature required DORESS ZIP DORESS ZIP DORESS ZIP	d when reinstating)		DATE	ND DIRECT Chans	TORS II	Addition Addition
or registere familiar with GNATURE	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	DELETE DELETE	NOTE: Registered 13. 111 12N 13S 140 2.1 22h 23S 240 311 32N 33. 341 41 421 4.35 4.44	DAME THE IAME STREET AD CITY-ST-2 THE VAME STREET AD CITY-ST-2 THE VAME STREET AD CITY-ST-2 THE VAME STREET AD CITY-ST-1 THE NAME STREET AD CITY-ST-1 THE NAME	gnature required DORESS ZIP DORESS ZIP DORESS ZIP DORESS ZIP	d when reinstating)		DATE	ND DIRECT Chan	TORS II	Addition Addition
or registere familiar witt GNATURE LE ME ME REEL ADDRESS Y-ST-ZIP LE ME REEL ADDRESS IY-ST-ZIP LE ME REEL ADDRESS IY-ST-ZIP LE ME ME REEL ADDRESS IY-ST-ZIP REEL ADDRESS IY-ST-ZIP LE ME ME REEL ADDRESS IY-ST-ZIP LE ME ME REEL ADDRESS	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	DELETE DELETE	NOTE: Registered 13. 111 12N 13S 140 2.1 22h 23S 240 31 32h 41 42 4.3 4.4 5.1 5.21 5.33	DAME TITLE IAME STREET AD CITY-ST-2 TITLE VAME STREET AD CITY-ST-2 TITLE NAME STREET AL CITY-ST-1 TITLE NAME STREET AC CITY-ST-1 TITLE	gnature required DORESS ZIP DORESS ZIP DORESS ZIP DDRESS ZIP	d when reinstating)		DATE	ND DIRECT Chan	TORS II	Addition Addition
or registere familiar with GINATURE LE ME REEL ADDRESS Y-ST-ZIP LE ME REEL ADDRESS IY-ST-ZIP LE ME REEL ADDRESS IY-ST-ZIP LE ME REEL ADDRESS IY-ST-ZIP LE MME REEL ADDRESS IY-ST-ZIP LE MME REEL ADDRESS IY-ST-ZIP LE MME REEL ADDRESS IY-ST-ZIP	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	DELETE DELETE	NOTE: Registered 13. 111 12N 13S 140 2.1 22h 23S 240 311 32h 4.1 4.2 4.3 4.4 5.1 5.21 5.33	DAME TITLE IAME STREET AD CITY-ST-2 TITLE VAME STREET AD CITY-ST-1	gnature required DORESS ZIP DORESS ZIP DORESS ZIP DDRESS ZIP	d when reinstating)		DATE	ND DIRECT Chan	TORS II ge ge ge ge ge ge ge	Addition Addition Addition
or registere familiar with GNATURE P. LE ME REEL ADDRESS IY-ST-ZIP LE ME REEL ADDRESS IY-ST-ZIP LLE MAME REEL ADDRESS ITY-ST-ZIP LLE MAME REEL ADDRESS ITY-ST-ZIP LLE MAME REEL ADDRESS ITY-ST-ZIP LLE	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	DELETE DELETE DELETE	NOTE: Registered 13. 111 12N 13S 140 211 22h 23S 240 311 32h 33. 341 411 421 511 521 531 541	DAME TITLE IAME STREET AD CITY-ST-2 TITLE VAME STREET AD CITY-ST-	gnature required DORESS ZIP DORESS ZIP DORESS ZIP DDRESS ZIP	d when reinstating)		DATE	ND DIRECT Chans	TORS II ge ge ge ge ge ge ge	Addition Addition Addition
or registere familiar with GNATURE	Signature, typed PD MC AI CLIEV	or printed range of registered as OFFICERS A ULIFFE, XAVIER ERAGH IND EST	onda. Sucrection 607.	DELETE DELETE DELETE	22 NOTE: Registered 13. 1 11 1.2 N 1.3 S 1.4 C 2.1 1 2.2 h 2.3 S 2.4 C 3.1 1 3.2 h 3.3 3 4.4 C 4.1 1 4.2 C 4.3 S 4.4 C 5.1 1 5.2 C 5.3 C 5.4 C 6.1 6.2 C	DAME STREET AD CITY-ST-2 TITLE NAME STREET AD CITY-ST-2 TITLE NAME STREET AD CITY-ST-1 TITLE	gnature required DORESS ZIP DORESS ZIP DORESS ZIP DORESS ZIP DDRESS ZIP	d when reinstating)		DATE	ND DIRECT Chans	TORS II ge ge ge ge ge ge ge	N 12

SIGNATURE: Her FORNANDEZ
ME OF SIGNING OFFICER OF DIRECTOR