

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 5:11

DOCUMENT # H22831

(2)

1. Corporation Name

DISCOUNT 1-HOUR PHOTO, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

C/O ELIZABETH L. ROBERTSON
651 W INDIANTOWN RD STE N
JUPITER FL 33458

C/O ELIZABETH L. ROBERTSON
651 W INDIANTOWN RD STE N
JUPITER FL 33458

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/26/1984

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2446832

Applied For

Not Applicable

State, Apt. #, etc.

State, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

23

28

8. The corporation has liability for intangible tax under S. 190.032,
Florida Statutes ☐ Yes ☐ No

24

25

County

29

Zip

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROBERTSON, ELIZABETH L.
651 W INDIANTOWN RD STE N
JUPITER FL 33458

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.01(2) and 607.12(6), 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. Each 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 Sections 607.01(2), Florida Statutes.

SIGNATURE

Signature of Registered Agent (if not a corporation, the name of the individual)

Signature of Registered Agent (if a corporation, the name of the individual)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	D
2. NAME	ROBERTSON, ROY A.
3. STREET ADDRESS	651 W INDIANTOWN RD N
4. CITY, ST, ZIP	JUPITER FL
5. TITLE	DV
6. NAME	ROBERTSON, ELIZABETH L.
7. STREET ADDRESS	651 W INDIANTOWN RD N
8. CITY, ST, ZIP	JUPITER FL
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	
21. TITLE	
22. NAME	
23. STREET ADDRESS	
24. CITY, ST, ZIP	

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.03(2)(b), Florida Statutes. I further certify that the information is included on the annual report or supplemental annual report as true and accurate and that my signature shall have the same legal effect as if made under oath. That I am, presently or have been, an officer or director of the corporation or have been authorized to make this report as required by Chapter 607, Florida Statutes, and that my name appears in this report. If the information has changed, or is inaccurate, please file with an addendum.

SIGNATURE: *Elizabeth L. Robertson* ELIZABETH L. ROBERTSON

4/2/95 4077474505