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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H63587

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DON SHEFFIELD PHOTOGRAPHY, INC.

FILED Apr 28 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address	3			- JOHNALI FINA BIING BILAN MAUNI IDNAL ANGLI ANGLI AIRIN ANGLI AIRIN ANGLI AIRIN ANGLI AIRIN ANGLI AIRIN ANGLI			
11700 SOUTH BUOD DRIVE COOPER CITY FL 33026			11700 SOUTH BUDD DRIVE COOPER CITY FL 33026-9713						
:						3. Date Incorporated or Qualified 06/25/1985	3a. Date	e of Last 1/1996	
	Place of Business	2a. Mailing Add	ress			4. FEI Number			Applied For
21		26				59-2547556			Not Applicat
Suite, Ar	pt. #, etc.	Suite, Apt. #	, etc.			5. Certificate of Status Desired			Additional Required
City & St	tate	City & State				6. Election Campaign Financing		\$5.0	May Be
23		28				Trust Fund Contribution			d to Fees
Zip	Country	Zip	a	ountry		8. This corporation has liability for in			s. 199.032,
24	25	29	30		·		Yes 🗌		
	9, Name and Address of C	urrent Registered Agent		81	Name	10. Name and Address of New Reg	istered A	gent	
	HEFFIELD, DONALD R.			۱۳'	Name				
	1700 South Budd Drive Ooper City FL 33026			62	Street Add	ress (P.O. Box Number is Not Acceptabl	e)		
				83					
				84	City		FL	85 Zi	p Code
office o agent. I SIGNATURE		•				tion's board of directors. I hereby acception is board of directors. I hereby acception is a second of the second	DATE	intment a	as registered
12.		S AND DIRECTORS	1:			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	ORS IN 12
TITLE	PD	D	ELETE 1.1	TITLE				Change	e 🔲 Additi
NAME	SHEFFIELD, DONALD R.		1.2	NAME	1				
STREET ADDRES		Æ	13	STREET	ADDRESS				
CITY-ST-ZIP	COOPER CITY FL			CITY-S	T-ZIP				
TITLE	ST		ELETE 2.1	TITLE			į	Change	e [_] Additi
NAMÉ	SHEFFIELD, BEVERLY J.	_	2.2	NAME					
STRÉET ADORES		/E	2.3	STREET	ADDRESS				
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CITY-ST-ZIF	SS)			STREET	ADDRESS		•		•

14. I do 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 fiam 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, or on an attachment with an address.

SIGNATURE: