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

DOCUMENT # H87746

1. Corporation Name

(4)

FOTOZINES INTERNATIONAL, INC.

FOTOZII	HES HATCHIAR HORALS					
Principal Place of Business		Maiting Address		164(\$) \$101 2114 12514 12514 ginin	CASA CICAL CACAS CACAS CACAS CACAS CACAS ACCAS ACCAS	
% GREGG DOBBS		P.O. BOX 747				
119 FIFTH AVI	ENUE	119 FIFTH AVENUE WINDERMERE FL 3478	ı s			T
WINDERMERE FL 34786		US		3. Date Incorporated or Qualified	3a. Date of Last Report 05/24/1995	
					12/03/1985 4. FET Number	4 Applied For
2. Principal Plac	ce of Business	2a. Maling Address			59-2624749	Not Applicable
21		Suite Apt. #, etc				\$8.75 Additional
Suite, Apt. #, etc.		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Auded to rees
Zip	Country	Ζιρ	Cour	ntry	8. This corporation has liability for Florida Statutes Yes	intangible tax under s 199.032.
24	25	29	30		10. Name and Address of New F	
	9. Name and Address of Cu	rrent Registered Agent		81 Name	144	, - , _, , , - , , , , , , , , , , , , ,
DADDA	CDECC			On Chron Add	ress (P.O. Box Number is Not Acceptab	ole)
DOBBS, GREGG 625 MAIN STREET				82 Street Add	ress (F.O. Dox Normber is Not Not opinion	
	MERE FL 34786			83		
14 1 1 1 1 1	ment is offer			84 Orty		85 Zip Code
				[ration submits this statement for the pu	FL 13 24 333
SIGNATURE	Signature: Typed or printed name of registers. OFFICERS	i signitian differential in the SAND DIRECTORS	()1t Registered	l Agent sgnature regen	हा करना काउंचातुर ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTORS IN 12
TITLE	ST	☐ DELETE	111	ITLE		☐ Change ☐ Addition
NAME	DOBBS, GREGG		1.2 N			
STREET ADDRESS	625 MAIN STREET			TREFT ADDRESS		
CITY-ST-ZIP	WINDERMERE FL	T DELETE	2 1 1	ITY - ST - ZIP		Change Addition
TITLE	DOBBS, LOURA	Deterie	221			
NAME STREET ADDRESS	625 MAIN STREET			FREET ADDRESS		
CITY-ST-ZIP	WINDERMERE FL		240	ITY - S* - Z.P		
TITLE		☐ DELETE	3 11	THUE		Change Addition
NAME			32 N			
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CITY-ST-ZIP		☐ DELETE	340	DIY-SI-ZIP		Change Addition
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CITY - ST - ZIP TITLE		☐ DELETE	5 1	1-TLF		☐ Change ☐ Addition
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STREET ADDRESS			5.33	SZBROCA TBBRTS		
CITY-ST-ZIP				CITY ST-ZIP		Change Addition
TITLE		☐ DELETE		TIFLE		□ onango □ vaccion
NAME				NAME STREET ADDRESS		
STREET ADDRESS				CITY - ST-ZIP		
CITY - ST - ZIP	1		resistand and	Lidoes not o salifi	for the exemption stated in Section 11	9 07(3)(k), Florida Statutes, I further

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 certify that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/96

Daytime Phone *

(R2E034 (12/95)