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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # J65456

1. Corporation Name

(2)

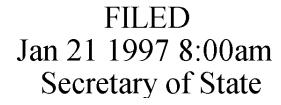
ONE HOUR PHOTOTASTIC AND CUSTOM OF BOCA RATON, I

Principal Place of Business 801 N FEDERAL HWY BOCA RATON FL 33432

SIGNATURE:

Mailing Address

801 N FEDERAL HWY BOCA RATON FL 33432-2731





US	UA HAIUN F	. 33432		US	US									
00				••						 Date Incorporated or Qu 03/30/1987 	alified		te of Last R)2/1996	eport
2.	Principal Pla	ce of Busir	iess	2a. N	2a. Mailing Address					4, FEI Number			Ap	plied For
21	1				26					59-2798397				t Applicable
22	Suite, Apt. #, etc.				Surle, Apt. #, etc.					5. Certificate of Status Des	ired		\$8.75 A	
23	City & State			 1	City & State					6. Election Campaign Fina Trust Fund Contribution	ncing		\$5.00 Added 1	
	Zıp	Country Zip Countr				Country	/		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes					
24		25 29 30 g. Name and Address of Current Registered Agent								10. Name and Address of				
	F101			in Hogisto	ioo Agoii.		81	N	ame	10. 144110 4114 11441		,		
FAGAN, THOMAS								L						
801 N FEDERAL HWY					82 Street			treet Addi	ress (P.O. Box Number is Not A	cceptab	le)			
	BOC	RATON	FL 33432				83	┝						
							84		ity			FL		Code
	office or re-	gistered ac	ions of Sections 607.05 jent, or both, in the Stat ith, and accept the obli	e of Florida	Such change i	was autho 5, Florida	rized by Statutes	y the s.	e corporal	poration submits this statement tion's board of directors. I herel	for the p by accep	t the app	changing it ointment as	s registered registered
		lgrature, typed	Loi printed name of registered a			(NOTE: Reg	stered Age	ent Big	gnatura requi	ired when reinstating)		DATE		
12	·		OFFICERS A	ND DIRECT			13.			ADDITIONS/CHANGES T	O OFFIC	ERS AND		
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NAN	AE	FAGAN,					1.2 NAME							
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					bleen									
NAP							5.2 NAME							
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TIT					DELETI		6.1 TITLE						Change	Addition
NAI	ME					1	6.2 NAME							
STE	REET ADORESS					1	6.3 STREET	T ADD	PRESS					
	Y-ST-ZIP						6.4 CITY - S							
14	information Lam an off	indicated icer or dire	on this annual report of	r supplemer or the recei	ntal annual repo ver or <u>tru</u> stee er	ort is true a mpowered	ind acc	urati	e and tha	d in Section 119.07(3)(i), Florida at my signature shall have the se ort as required by Chapter 607,	ame lega	l effect as	if made un	der oath; that