## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1897. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION** ANNUAL REPORT

1997



## FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K10797

(4)

PHOTOWORKS OF SOUTH FLORIDA, INC.

FILED
Aug 08 1997 8:00am
Secretary of State

DO NOT WRITE IN THIS SPACE

Principal Plac	e of Business	Mailing Addre	ess				1 <b>0</b> 10 10 11 11 11 11 11 11 11 11 11 11 11				
% BRIAN WALLACE % BRIAN WALLACE											
2300 S.E. 17T		2300 S.E. 171				DO NOT WRITE IN THE COACE					
FT. LAUDERDALE FL 33316 FT. LAUDERDALE FL 33316						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 3a. Date of Last Report					
						01/06/1988	06/12/1996				
2. Principal P	Place of Business	2a. Mailing Ac	Idress			4. FEI Number	VQ	<u>  16/18</u>		olied For	4
21		26				65-0044571				Applicable	7
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			S 75 Additional					1
22		27				5. Certificate of Status Desired			e Rec		
	City & State City & State					6. Election Campaign Financing		\$5.	.00 N	May Be	٦
23		28				Trust Fund Contribution		Ad	ded to	Fees	
Zip	Country	Zip	<del> </del>	untry	<i>'</i>	8. This corporation owes or has pa					
24	25 25 Name and Address of C	29 29 Agent Agen	30	1		Personal Property Tax due June  10. Name and Address of New Re		Yes		No	4
WA	LLACE, BRIAN	and the state of t	•	81	Name	IV. Italije and Addiess Of Rew Re	Aisraled (	ypant			$\dashv$
	FIESTA WAY										╛
	LAUDERDALE FL 33301			82	Street Add	dress (P.O. Box Number is Not Acceptab	le)				
'''				83						•	$\dashv$
				_							
				84	City		FL	85	Zip Ci	ode	
11. Pursuant	to the provisions of Sections 60	7.0502 and 607.1508, Flo	orida Statutes, the a	bove	ı e-named co	rporation submits this statement for the p		changi	ng its	registered	$\forall$
I office of r	registered agent, or both, in the im familiar with, and accept the	State of Florida, Such ch	ange was authorize	ea by	/ the corpora	alion's board of directors. Thereby accep	t the app	ointmen	it as re	egistored	
SIGNATURE											
<u> </u>	Signature, typed or printed name of registe				par enutangia Inc	uired when reinstating)	DATE				
12.	OFFICER D	S AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND				
TITLE	WALLACE, BRIAN	Ц	DELETE 1.1 1					L Char	age	Addition Addition	
NAME DEDCCE ADDRESS	18 FIESTA WAY			IAME							1
STREET ADDRESS	FT. LAUDERDALE FL				ADDRESS						
CITY-ST-ZIP	1,3 (/				1 - ZIP			Char	200	Addition	4
NAME	WALLACE, KEADY	ㅂ	DELETE 2.1 7					L Char	ıйе	■ Addition	ľ
STREET ADDRESS	18 FIESTA WAY				ADDRESS	. **					
CITY-ST-ZIP	FT. LAUDERDALE FL		1		SI-ZIP						
TITLE		П	DELETE 3.17		21-711			☐ Char	106	Addition	1
NAME		_	3.2 N					OIG	.A.		-
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP				HTY-S		· .					
TITLE			DELETE 4.1 T					☐ Char	nge	Addition	1
NAME			4 2 1	NAME					•		
STREET ADDRESS			435	TREET	ADDRESS						
CITY-ST-ZIP			9	11Y-\$1							-
TITLE			DELETE 5.1 T	ITLE				☐ Char	nge .	Addition	1
NAME			5.2 N	AME							
STREET ADDRESS			5.3 S	TREE1	ADDRESS						
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·			ITY - S	1 - ZIP						
TITLE			DELETE 6.1 T	IILE				☐ Chan	ige	Addition	1
NAME	•		6.2 N	AME							1
STREET ADDRESS	•		6.3 \$	TREET	ADDRESS						
CITY-ST-ZIP			6.4 C	ITY-SI	I - 7IP						

14. I do hereby certify that the information supplied will 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 eath; that I am 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 or a attachment with an address.