

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

2004 AUG 17 PM 12: 22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K12978

1. Entity Name
PHOTO SHOPPER, INCORPORATED



Principal Place of Business
2905 E. BUSINESS HWY. 98
PANAMA CITY, FL 32401

Mailing Address
2905 E. BUSINESS HWY. 98
PANAMA CITY, FL 32401



08022004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2866092

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HILLIER, RHONDA B.
139 ARLINGTON DR
PANAMA CITY, FL 32404

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	HILLIER, ROBERT D
STREET ADDRESS	139 ARLINGTON DR
CITY-ST-ZIP	PANAMA CITY, FL 32404
TITLE	VPS
NAME	BROWN, STEPHEN
STREET ADDRESS	636 SHORIY KEMP RD
CITY-ST-ZIP	WEWAHITCHKA, FL 32465
TITLE	T
NAME	HILLIER, RHONDA B
STREET ADDRESS	139 ARLINGTON DR
CITY-ST-ZIP	PANAMA CITY, FL 32404
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

600040262606
08/17/04--01076--001 **150.00

**DO NOT WRITE
IN THIS SPACE**

12m
8/17/04

12. I 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rhonda Hillier RHONDA HILLIER 850-285-7355

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #