SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

K51212

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COMPLITER PHOTO FUN. INC.

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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| incipal Place o | f Business | Mailing Address | | | f idition bit tilen unter magn mare ; | 1161 AIR11 B1811 AII | 911 WIBLI BIGII BIBII 1891 |
| % HAROLD R. 1517 CLOVERL | | % HAROLD R. ELLIS 1517 CLOVERLAWN A | VE | | | | |
| ORLANDO FL 3 | | ORLANDO FL 32806 | | | 3. Date Incorporated or Qualified 12/14/1988 | | of Last Report 9/1995 |
| Principal Plac | ce of Business | 2a. Mailing Address | | | 4. FEI Number 59-2924413 | | Applied For Not Applicable |
| Suite, Apt #. | etc | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | \$8.75 Additional Fee Required |
| City & State | | City & State | | | Election Campaign Financing Trust Fund Contribution | | \$5.00 May Be Added to Fees |
| Zip | Country | 28 | Country | | This corporation has liability for Florida Statutes | intangible tax | x under s. 199.032, No |
| | 25 | 29 | 30 | | 10. Name and Address of New R | | |
| | 9. Name and Address of Curren | i Hegistereo Agent | 81 | Name | | | |
| | IS, HAROLD R. 7 CLOVERLAWN AVE | | 82 | Street Addr | ress (P.O. Box Number is Not Accepta | ble) | |
| | LANDO FL 32806 | | 83 | | | | |
| | | | 64 | City | | FI | 85 Zip Code |
| | | | 1 1 | • | oration submits this statement for the join's board of directors. I hereby accept | FL | ito sociologid |
| office or reg agent. I am IGNATURE | The core is contact according to the following age | ect and title 1 applicable (I | OTE Registered Age | of signature requi | ired when reinstating) | DATE | |
| IGNATURE 5 | | ect and title Lapplicable (I ID DIRECTORS DELETE | 13. | of signature requi | and when reinstating) ADDITIONS/CHANGES TO OFF | | DIRECTORS IN 12 Change Addition |
| ignature 2. Tile | OFFICERS AN | ID DIRECTORS | 13. | of signature requi | ADDITIONS/CHANGES TO OFF | | DIRECTORS IN 12 Change Additi |
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