SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

9940 SW 97TH CT

MIAMI FL 33176

21

22

23

24



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K57810

(9)

Mailing Address

C/O UNDA ADAMS

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

27

26

29

1 at Patrice land

9940 SW 97TH COURT MIAMI FL 33176

CHARLES ADAMS PHOTOGRAPHY INC.

Country

9. Name and Address of Current Registered Agent

25

FILED				
Aug 05 1997 8:00am				
Secretary of State				

	{		918) 918) 818 818 818 188	
	DO NOT WRITE	IN TH	IIS SPACE	
3.	Date Incorporated or Qualified	3a.	Date of Last Report	
	01/12/1989		05/01/1996	
4.	FEI Number		Applied For	
	65-0091568		Not Applicable	
Б.	Certificate of Status Desired		\$8.75 Additional Fee Required	
6.	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
8.	This corporation owes or has pa Personal Property Tax due June		current year Intangible Yes No	
10.	Name and Address of New Registered Agent			

m/anlan

81 ADAMS, LINDA Name 9940 SW 97TH COURT 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33176 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, lyped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE Change Addition 11 TITLE **ADAMS, CHARLES** NAME 1.2 NAME 9940 SW 97TH CT. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE Addition 21 1t1LE ADAMS, KENT NAME 22 NAME 10371 SW 113 STREET STREET ADDRESS 23 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETÉ Change TITLE 3.1 TITLE Addition ADAMS, LINDA NAME 3.2 NAME 9940 SW 97TH CT. STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP ■ DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change DELETE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

Country

30