

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L95580**

(1)

1. Corporation Name

B & W PHOTO FINISHING, INC.

Principal Place of Business

**12242 SW 132 CT
MIAMI FL 33186
US**

Mailing Address

**12242 SW 132 CT
MIAMI FL 33186
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**FITE, JAMES H.
11395 SW 1ST TERRACE
MIAMI FL 33184**

3. Date Incorporated or Qualified

08/14/1990

3a. Date of Last Report

07/07/1995

4. FEI Number

65-0213676

Applied For

Not Applicable

5. 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 has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

JOSE J. PEREZ

82 Street Address (P.O. Box Number is Not Acceptable)

12242 SW 132 CT

83

84 City

MIAMI

FL

85 Zip Code

33186

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0503, Florida Statutes.

SIGNATURE **JOSE J. PEREZ**

4-1-96

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**PST
PEREZ, JOSE JAVIER
6410 SW 130 AVE #504
MIAMI FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**D
PEREZ, JOSE JAVIER
6410 SW 130 AVE #504
MIAMI FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**VO
LEWIS, DEBORAH ANN
6410 SW 130 AVE #504
MIAMI FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

25 TITLE

26 NAME

27 STREET ADDRESS

28 CITY-STATE-ZIP

29 TITLE

30 NAME

31 STREET ADDRESS

32 CITY-STATE-ZIP

33 TITLE

34 NAME

35 STREET ADDRESS

36 CITY-STATE-ZIP

37 TITLE

38 NAME

39 STREET ADDRESS

40 CITY-STATE-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

45 TITLE

46 NAME

47 STREET ADDRESS

48 CITY-STATE-ZIP

49 TITLE

50 NAME

51 STREET ADDRESS

52 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 118.07(3)(k), 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 authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if change of information must be indicated.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSE JAVIER PEREZ

4-1-96

(305) 235-9203

CR2E034 (12/95)