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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # M122 1. Corporation Name GLENN WATSON PHOTOGRAP	(-)		1 13 \$10 \$11 10 1 10 10 10 10 10 10 10 10 10 10 10	OBJUB NAME BYBNIK BYBNIK BODIK BODIK BUBNIK BUBNIK BUBNIK ABDIK
Principa' Piace of Business C/O WATSON, GLENN	Mailing Address			
7100 6.W. 30TH ROAD MIAMI FL 33155 US	MIAMI FL 33155 US		3. Date Incorporated or Qualified 3a. Date of Last Report	
2. Principal Place of Business	_ 2a, Mailing Address		03/07/1985 4. FEI Number	04/25/1995 Applied For
19031 S.W. 62 Ten	n 26 9031 S	W 62 Terr	59-2512947	Not Applicable
Suite, Apt. #, etc 2	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State MIRMI F-1A.	28 M 10m j	FLA	Election Campaign Financing Trust Fund Contribution	
33/73 Country USA	^{Zip} 33173	Country SA	Florida Statutes	for intangible tax under s 199.032, Yes 🔲 No
9, Name and Address of Cur	rent Registered Agent	81 Name	10. Name and Address of Ne	
WATSON, GLENN				XNN
7100 S.W. SOTH ROAD		82 Street Addu	ess (P.O. Box Number is Not Accept	a Ten.
9031 S.W. 62 TERR. Miami Fl 33155	· ·	84 (1)		85 Zip Code
11. Pursuant to the provisions of Sections 607.0		1 77	1 (UL)	FL [33/75
	AND DIRECTORS	E. Flogistered Agent signature required. 13.		DATE DEFICERS AND DIRECTORS IN 12
NAME PO WATSON, GLENN	☐ DERETE	1 1 TITLE 12 NAME		☐ Change ☐ Addition
9031 SW 62ND TERR		13 STREET ADDRESS		
MIAMI FL		14 CITY - ST - ZIP		
ILE .	<u> </u>	2 1 11TLF		☐ Change ☐ Addition
AME TREET ADDRESS		2.2 NAME 2.3 STREET ADDRESS		
HY+S1-ZIF		2 4 CITY - ST - ZIP	•	
HLE .	☐ DELETE	3 1 TITLE		☐ Change ☐ Addition
AM'S		3.2 NAME		
1851 ADDRESS		3 3 STREET ADDRESS		
HY-S1 ZIF	DELETE	3 4 CITY - ST - ZIP		Change Addition
AME		4.2 NAME		C Avening C Videovori
TREET ADDRESS		4.3 STREET ADDRESS		
BUY-ST ZIF		4.4 CITY - ST- ZIP		
(fi.F	☐ DELETE	5 1 TITLE		☐ Change ☐ Addition
AME		5.2 NAME		
THEFT ADDRESS		5 3 STREET ADDRESS		
(ILY-ST-70°		5 4 CITY - ST - ZIP		Channa D 1175.
AME	Flocus	6 1 TITLE 6.2 NAME		Change Addition
THEF! ADDRESS		6.2 NAME 6.3 STREET ADDRESS		
PITY KADACSA		6.4 CITY - \$1 - ZIP		
4. Edo hereby certify that the information supplied	ed with this filing is voluntarily furnis	hed and does not qualify for	r the exemption stated in Section 1	19.07(3)(k), Florida Statutes. I further
 certify that the information indicated on this a oath; that I am an officer or oirector of the co appears in Block 12 or Block 13 if changed, 	rporation or the receiver or trustee.	empowered to execute this	e and that my signature shall have report as required by Chapter 607	the same legal effect as if made under , Florida Statutes; and that my name

SIGNATURE:

OFFICER OR DIRECTOR

2/5/96 (305)2669146 Date Deptino Priore 2