FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT Apr 21 1998 8:00am FLORIDA DEPARTMENT (F. STATE **CORPORATION** Sandra B. Morthim ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #

1. Corporation Name M19319 (6) FOTOWERKES INC. Principal Place of Business Mailing Address 1830 MERIDIAN AVENUE 1830 MERIDIAN AVENUE **SUITE 1105 SUITE 1105** DO NOT WRITE IN THIS SPACE MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 3. Date Incorporated or Qualified 08/13/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 21 59-2566221 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 1rust Fund Contribution Added to Fees 28 Zip Country Zgr Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 25 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SCHIFF, KENNETH 1830 MERIDIAN AVE 82 Street Address (P.O. Box Number is Not Acceptable) STE 1105 83 MIAMI BCH FL 33139 Zip Code 85 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition TITLE 1.1 TITLE SCHIFF, KEN NAME 12 NAME STREET ADDRESS 1830 MERIDIAN AVE 1.3 STREET ADDRESS MIAMI BEACH FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 211016 TITLÉ ST NAME SCHIFF, KEN 2.2 NAME 1830 MERIDIAN AVE STREET ADDRESS 2.3 STREET ADDRESS MIAMI BEACH FL 2 4 CITY - S1 - ZIP CITY-ST-ZIP DELETE Change ___ Addition TITLE 3 1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 41 10 LE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 City - \$1 - ZiP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 5.1 THLE **5.2 NAME** NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City - ST-ZIP CITY-ST-ZIP DELETE Change ■ Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. 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 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 empoyed 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.

111/98

FILED