2005 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT

DOCUMENT # M63507

1. Entity Name
DALTON PHOTO & ATELIER, INC.

FILED
Jan 28, 2005 08:00 AM
Secretary of State

Principal Place of Business C/O MIGDALIA HERNANDEZ 4187 PALM AVENUE

HIALEAH, FL 33012-4451

HIALEAH, FL 33013

Mailing Address

C/O MIGDALIA HERNANDEZ 4187 PALM AVENUE HIALEAH, FL 33012-4451



DO NOT WRITE IN THIS SPACE

01212005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0047260

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
HERNANDEZ, MIGDALIA
4187 PALM AVENUE

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IGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registored				required when reinstating)	DATE
FILI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	, _□	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			······································
ITLE NAME STREET ADDRESS SITY-ST-ZIP	PD HERNANDEZ, MIGDALIA 121 EAST 42ND ST. HIALEAH, FL	-			U00000202397 -01/28/05-80110-007_158.75
ITLE IAME ITREET ADDRESS IITY-ST-ZIP	STD HERNANDEZ, JULIO 121 EAST 42ND ST. HIALEAH, FL		•		
itle IAME Street address City-St-Zip				DO	NOT WRITE
ITLE IAME TREET ADDRESS ITY-ST-ZIP				IN	THIS SPACE
ITLE IAME ITREET ADDRESS ITY+ST-ZIP					
ITLE IAME ITREET AODRESS IITY-ST-ZIP		ling does not qualify for the exempt			

12. Thereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SONA DINE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/21/05 (305) 822-603