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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # M97742

(4)

BUNI PH	OTOGRAPHY, INC.	Mailing Address	,, , ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,						
27384 US 1A N		27384 US 1A NO							
UNIT 1		UNIT 1							
CLEARWATER FL 34621 CLEARWATER FL 34621 US US						2 0-1-1	Jan Data	at less D.	- nart
00						3. Date Incorporated or Qualified 09/09/1988	od 3a Date of Last Report 03/14/1996		
2 Principal P	ace of Business	2a. Mailing Address				4. FEI Number	100/14/		plied For
	รี่นั้นรีเจ ฟ.	26 27384 US	19	N.		59-2904906		 	t Applicable
Suite, Apt		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A	Additional
City & State	0	City & State				6. Election Campaign Financing	······································	\$5.00	
23/Clear	water, FL.	28 Clearwater,	FL			Trust Fund Contribution		Added to	-
Zip	Country	Zip	Cour		*****	8. This corporation has liability for	intangible tax	x under s.	199.032,
24 3462	21 25 US		o U	<u> </u>		Florida Statutes	Yes 🗌	No	
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Re	gistered Ag	ent	
	TRELLO, WM. G.			81 Name					
619 CHESTNUT ST.				32 Street	2 Street Address (P.O. Box Number is Not Acceptable)				
CLEARWATER FL 34616									
				B3					
			- -	B4 City				85 Zip C	Code
							┡┖┈		
11. Pursuant office or ragent. La	to the provisions of Sections 607.05 registered agent, or both, in the Stati im familiar with, and accept the oblig	02 and 607.1508, Florida Statules e of Florida. Such change was au gations of, Section 607.0505, Flori	s, the ab rthorized ida Statu	ove-named by the cor ites.	corpo poration	oration submits this statement for the pon's board of directors. I hereby accept	ourpose of cit of the appoir	nanging its	s registered registered
SIGNATURE.									
	Signature, typed or printed name of registered as			Agent signature	e require	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	UDECTOR	C IN 12
12.	D OFFICERS AF	ND DIRECTORS DELETE	13.	r	17			Change	Addition
TITLE	ZUBALY, MARGARET R		1.2 NAJ	_	201	Baly, Margaret R	ų.	y Change	- rigaliton
NAME	28784 US 19 NO UNIT 1			ieet address	27	884 US 19 N.			
STREET ADDRESS	CLEARWATER FL		1		CLA	arwater, FL 346 21			. 1
CITY-ST-ZIP TITLE	OLL WITH L	DELETE	2.1 Till	Y-ST-ZIP	110	area jed		Change	Addition
NAME			2.2 NAI		1		-	2	
STREET ADDRESS				EET ADDRESS					
CHY-ST-ZIP			1	Y-ST-ZIP					
TITLE		DELETE	3.1 TiT		1		T.	Change	Addition
NAME			3.2 NA	ME					Ì
STREET ADDRESS			3.3 ST	REET ADDRESS			•		
CITY - ST - ZIP			3.4 CI	Y-ST-ZIP					
TITLE		DELETE	4.1 TH		1		· L.	Change	Addition
NAME			4. 2 NA	ME	-				
STREET ADDRESS			4.3 \$16	REET ADDRESS					
CITY - ST - ZIP			4.4 CIT	Y-ST-ZIP					
TITLE		☐ DELETE	5.1 TIT	LE				Change	Addition
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 \$11	EET ADDRESS					
CITY - ST - ZIP			5.4 CI7	Y-ST-ZIP	1				
TITLE		☐ DELETE	6.1 TIT	LE		•	L	Change	Addition
NAME	!		6.2 NA	MF	1				

STREET ADDRESS

CITY - ST - ZIP

63 STREET ADDRESS

64 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 is changed, or on an attachment with an address.

FILED

Feb 11 1997 8:00am

Secretary of State