

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90208 043 ***150.00

DOCUMENT # M97742

1. Entity Name
BUNI PHOTOGRAPHY, INC.



Principal Place of Business

~~27304 US 10 N~~
~~CLEARWATER, FL 33761~~ US
1248 FLORIDA AVE
PALM HARBOR, FLA 34683

Mailing Address

~~27304 US 10 N~~
~~CLEARWATER, FL 33761~~ US
1248 FLORIDA AVE
PALM HARBOR, FLA 34683

54039147

2. Principal Place of Business

1248 FLORIDA AVE

3. Mailing Address

1248 FLORIDA AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04142004

Chg-P

CR2E034 (10/03)

City & State

PALM HARBOR FL

City & State

PALM HARBOR FL

4. FEI Number

59-2904906

Applied For

Not Applicable

Zip

34683

Country

US

Zip

34683

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PONTRELLO, WM. G.
619 CHESTNUT ST.
CLEARWATER, FL 34616

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME ZUBALY, MARGARET R
STREET ADDRESS ~~27304 US 10 N~~ 1248 FLORIDA AVE
CITY-ST-ZIP CLEARWATER, FL PALM HARBOR, FLA 34683

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

12. 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 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: *Margaret R. Zubaly* PRES. Buni Photography Inc. 784-1633
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARGARET R. ZUBALY

Date

Daytime Phone #

4-19-04