

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010852

FILED
May 03, 2007
Secretary of State

Entity Name: ART PHOTOGRAPHY PARENT ORGANIZATION CORP.

Current Principal Place of Business:

16301 SW 80 AVE
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

16301 SW 80 AVE
MIAMI, FL 33157

New Mailing Address:

FEI Number: 51-0621162 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROBBINS, LORI
16301 SW 80 AVE
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BENJELLOUN, JULIE
Address: 16800 SW 87 CT
City-St-Zip: MIAMI, FL 33157

Title: V () Delete
Name: TODISCO, LISA
Address: 9325 SW 142 ST
City-St-Zip: MIAMI, FL 33176

Title: T () Delete
Name: MORENO, ALTEMIZA
Address: 14454 SW 179 LANE
City-St-Zip: MIAMI, FL 33177

Title: S () Delete
Name: THOMAS, KATHY
Address: 15751 SW 88 AVE
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIE BENJELLOUN

P

05/03/2007

Electronic Signature of Signing Officer or Director

Date