2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000027651

Name:

Address:

City-St-Zip:

PIRES, SERGIO H

18373 N.E. 4TH COURT

NORTH MIAMI BEACH, FL 33179

Entity Name: NTT PHOTO CORPORATION

FILED Mar 17, 2005 Secretary of State

		1101000	ra oroanor					
Current Principal Place of Business:				New Principal Place of Business:				
	4 COURT 11AMI BCH, F	FL 33179						
Current Mailing Address:				New Mailing Address:				
	4 COURT IIAMI BCH, F	FL 33179						
FEI Number: 65-0990973 FEI Number Applied Fo			ımber Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()			i()	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
The above in the State	4 COURT IIAMI BCH, F e named enti e of Florida.		US this statement for the	purpose of changing i	ts registered o	office or registered agent, o	or both,	
SIGNATU		ronic Signa	ature of Registered Ag	ent		Date		
Election Ca	mpaign Finan	cing Trust F	und Contribution ().					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P JARAMILLO 18373 NE 4 NORTH MIA	*	33179	Title: Name: Address: City-St-Zip:	JARAMILLO, E 3245 NE 184T	H STREET #13305		
Title: Name: Address: City-St-Zip:	V JARAMILLO 6655 NW 17 HIALEAH, F	74 LANE		Title: Name: Address: City-St-Zip:	() Change()Addition		
Title [.]	S	(X) Delete		Title:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: EMI JARAMILLO P 03/17/2005