2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 07, 2007 8:00 am Secretary of State DOCUMENT # P010000076γ3 1. Entity Name 02-07-2007 90045 001 ***150 00 PENKWITT PHOTOGRAPHY, INC. Principal Place of Business Mailing Address 3415 ROYAL PALM AVENUE 3415 ROYAL PALM AVENUE MIAMI BEACH FL 33140 MIAMI BEACH FL 33140 2. Principal Place of Business - No P.O. Box # 3. Mailing Address GRAND CONCOURSE 500 GRAND CONCOURSE Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Numbor Applied For 65-1080212 SHOWES FORIDA MIAMI SHOPE Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BRITO, LUIS G 407 LINCOLN ROAD 500 Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH FL 33139 City 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 harno of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Addition HILE ☐ Defete IIII E ☐ Change PENKWITT, PATRICK NAME NAMI 407 LINCOLN ROAD, SUITE 500 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33139 CITY-ST-ZIP CITY - ST - 7IP ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY - S1 - ZIP ☐ Detete Bit HHF ☐ Change ☐ Addition NAMI NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CHY-ST-ZIP TITLE ☐ Defete HILLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CHY-S1-ZIP UUF ☐ Delete ☐ Change HILL Addition NAME. NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STRUET ADDRESS CITY - ST - 71P CHY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information

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