2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 20, 2006 08:00 AN Secretary of State

CB2E034 (11/05)

Daylima Phone

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1. Entity Name

POSITIVE IMAGE PHOTOGRAPHY, INC.

Principal Place of Business

5818 ARBOR WALK LN. TAMPA, FL 33624

TREBES, BARBARA A

SIGNATURE:

5818 ARBOR WALK LN. TAMPA, FL 33624 Mailing Address

5818 ARBOR WALK LN. TAMPA, FL 33624

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6. Name and Address of Current Registered Agent

0		Ug .	w	1,00
4.	FEI Number			Applied For
	59-37226	59		Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

. Certificate of Status Desired

No Cha-P

01162006

DO NOT WRITE

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						
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finance Trust Fund Contribution.	cing .	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	ŢORS ,			·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TREBES, BARBARA A 5818 ARBOR WALK LN. TAMPA, FL 33624					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					03/04/06-80023-024 150.00	
Title Name Street Address City-St-Zip		:		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as it 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.						