2002 UNIFORM BUSINESS REPORT (UBR)

Jul 10, 2002 8:00 am Secretary of State P01000117801 DOCUMENT # 1. Entity Name 07-10-2002 90180 010 ***150.00 PHOTOGRAPHIC ARTWORKS, INC. Principal Place of Business Mailing Address 16410 SAPPHIRE BEND 16410 SAPPHIRE BEND WESTON FL 33331 WESTON FL 33331 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ARATO, MICHAEL S Street Address (P.O. Box Number is Not Acceptable) 16410 SAPPHIRE BEND WESTON FL 33331 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE Change TITI F ☐ Delete ARATO, MICHAEL S NAME NAME 16410 SAPPHIRE BEND STREET ADDRESS STREET ADDRESS WESTON FL 33331 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change --- Addition Delete ---TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITI F ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE

13. 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 11 or Block 12 if changed, or on an attachmer

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED

Attachment Dr. # P01000/1780/ PhotoGraphic Artworks, Inc. 12009/

16410 Sapphire Bend Weston, FL 33331 marato@bellsouth.net

July 5, 2002

To Whom It May Concern:

This is to inform you that my "first" copy of request to file a Uniform Business Report arrived only last week. As stated in the FAQ on your form, I should be exempt from any penalty. Attached is my yearly payment of \$150.00

Sincerely,

Michael S. Arato/President/PhotoGraphic Artworks, Inc.