2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2008
Secretary of State

DOCUMENT# P02000041988

Entity Name: PHOTOGRAPHY BY IMAGINATIONS, INC.

Current Principal Place of Business:

1930 HARRISON STREET SUITE 503
HOLLYWOOD, FL 33020

New Principal Place of Business:

1930 HARRISON STREET
SUITE 503
HOLLYWOOD, FL 33020

Current Mailing Address:

1930 HARRISON STREET SUITE 503
HOLLYWOOD, FL 33020

New Mailing Address:

1930 HARRISON STREET
SUITE 503
HOLLYWOOD, FL 33020

FEI Number: 56-2305658 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOCHSZTEIN, FRED ESQ
1930 HARRISON STREET SUITE 503
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

HOCHSZTEIN, FRED ESQ
1930 HARRISON STREET
SUITE 503
HOLLYWOOD, FL 33020 US

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: FRED HOCHSZTEIN 03/19/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: CAPDEVILLE, LARRY
Address: 5010 SOUTH UNIVERSITY DRIVE
City-St-Zip: DAVID, FL 33328

Title: DVTS ( ) Delete
Name: CAPDEVILLE, SUSAN
Address: 5010 SOUTH UNIVERSITY DRIVE
City-St-Zip: DAVID, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: CAPDEVILLE, LARRY
Address: 5010 SOUTH UNIVERSITY DRIVE
City-St-Zip: DAVIE, FL 33328

Title: DVTS (X) Change ( ) Addition
Name: CAPDEVILLE, SUSAN
Address: 5010 SOUTH UNIVERSITY DRIVE
City-St-Zip: DAVIE, FL 33328

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY CAPDEVILLE DP 03/19/2008
Electronic Signature of Signing Officer or Director Date