2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000068332

1. Entity Name

NANCY BROWN PHOTOGRAPHY, INC.



FILED Feb 23, 2004 8:00 am Secretary of State

02-23-2004 90048 047 ***150.00

Principal Place of Business

Mailing Address

381 MOHAWK:LANE

381 MOHAWK LANE

BOCA RATON, FL 33487

54009004



DO NOT WRITE IN THIS SPACE

01262004 No Chg-P CR2E034 (10/03)

4. FEI Number 55-0791252

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PIAZZA, VINCENT J ESQ. 7777 GLADES ROAD SUITE 200 BOCA RATON, FL 33434

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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 a	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

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9.≥Election Campaign Financing Trust Fund Contribution. \$5:00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. TITLE BROWN, NANCY NAME 381 MOHAWK LANE STREET ADDRESS BOCA RATON, FL 33487 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. 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 10 or Block 11 if changed, or on an attactber on the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of 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 attactber of the same legal effect as if made under oath; with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

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