


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000106614 1. Entity Name FOTOTECHNIKA FINE ART IMAGING, INC.	
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Principal Place of Business 624 LOMAX STREET JACKSONVILLE, FL 32204 US	Mailing Address 624 LOMAX STREET JACKSONVILLE, FL 32204 US
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01052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3746345	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HUNTER, LEWIS B 4201 BAYMEADOWS ROAD SUITE 4 JACKSONVILLE, FL 32217

**DO NOT WRITE
IN THIS SPACE**

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 <u>SAUNDRA S. HOWARD</u> 624 LOMAX ST. JACKSONVILLE, FL. 32204	DATE <u>4-27-04</u>

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000139199 04/29/04-80110-013 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOWARD, SAUNDRA S 624 LOMAX STREET JACKSONVILLE, FL 32204
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 attachment with an address, with all other like empowered.		
SIGNATURE: <u>SAUNDRA S. HOWARD</u>	DATE <u>4-27-04</u>	DAYTIME PHONE # <u>904-356-2503</u>