

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000106614

**FILED**  
**Jan 07, 2012**  
**Secretary of State**

**Entity Name:** FOTOTECHNIKA FINE ART IMAGING, INC.

**Current Principal Place of Business:**

624 LOMAX STREET  
JACKSONVILLE, FL 32204 US

**New Principal Place of Business:**

**Current Mailing Address:**

624 LOMAX STREET  
JACKSONVILLE, FL 32204 US

**New Mailing Address:**

**FEI Number:** 59-3746345

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HUNTER, LEWIS B  
4201 BAYMEADOWS ROAD  
SUITE 4  
JACKSONVILLE, FL 32217 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** DPS  
**Name:** HOWARD, SAUNDRA S  
**Address:** 624 LOMAX STREET  
**City-St-Zip:** JACKSONVILLE, FL 32204 US

**Title:** TD  
**Name:** HOWARD, JOHN R  
**Address:** 624 LOMAX ST  
**City-St-Zip:** JACKSONVILLE, FL 32204

I hereby 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 all other like empowered.

**SIGNATURE:** SAUNDRA S. HOWARD

DPS

01/07/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date