


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90119 016 ***150.00

DOCUMENT # P04000101913 1. Entity Name DIEZ AND LEWIS PHOTOGRAPHY, INC.					
Principal Place of Business 1071 CANDLELIGHT BLVD - # F-94 BROOKSVILLE, FL 34601			Mailing Address 1071 CANDLELIGHT BLVD - # F-94 BROOKSVILLE, FL 34601		
2. Principal Place of Business 11230 Wirt Road Suite, Apt. #, etc.		3. Mailing Address P.O. Box 1003 Suite, Apt. #, etc.			
City & State San Antonio, FL Zip 78133 Country Pasco		City & State Brooksville, FL Zip 34605 Country Hernando		4. FEI Number 20-1295100	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input checked="" type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent WHITE, STACI LEWIS 1071 CANDLELIGHT BLVD - # F-94 BROOKSVILLE, FL 34601				7. Name and Address of New Registered Agent Name White, Staci Lewis Street Address (P.O. Box Number is Not Acceptable) 11230 Wirt Road City San Antonio, FL Zip Code 78133	
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><i>Staci Lewis White</i></u> DATE <u><i>4/28/05</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WHITE, STACI LEWIS 1071 CANDLELIGHT BLVD - # F-94 BROOKSVILLE, FL 34601	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	White, Staci Lewis 11230 Wirt Road San Antonio, FL 78133
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DIEZ, STEVEN R 1071 CANDLELIGHT BLVD - # F-94 BROOKSVILLE, FL 34601	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Diez, Steven R 11230 Wirt Road San Antonio, FL 78133
TITLE NAME STREET ADDRESS CITY - ST - ZIP	-	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	-	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	-	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Staci Lewis White</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u><i>1/18/05 352-799-7958</i></u> <small>Date Daytime Phone #</small>		