

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000062018

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** PERSPECTIVES PHOTO ARTISTRY, INC.

**Current Principal Place of Business:**

115 S. FLORIDA AVE  
LAKELAND, FL 33801

**New Principal Place of Business:**

244 N KENTUCKY AVE.  
LAKELAND, FL 33801

**Current Mailing Address:**

115 S. FLORIDA AVE  
LAKELAND, FL 33801

**New Mailing Address:**

244 N KENTUCKY AVE.  
LAKELAND, FL 33801

**FEI Number:** 20-2774979

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROMERO, AMANDA L PRES  
714 W. PARK ST.  
LAKELAND, FL 33803 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: PSTD  
Name: ROMERO, AMANDA L  
Address: 714 W. PARK ST.  
City-St-Zip: LAKELAND, FL 33803

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: AMANDA L ROMERO

PRES

04/30/2011

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

\_\_\_\_\_  
Date