

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000141619

FILED  
Jan 08, 2010  
Secretary of State

**Entity Name:** MUNOZ PHOTOGRAPHY ENTERPRISES, INC.

**Current Principal Place of Business:**

664 W OAKLAND PARK BLVD  
WILTON MANORS, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

664 W OAKLAND PARK BLVD  
WILTON MANORS, FL 33311

**New Mailing Address:**

**FEI Number:** 20-8517632

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MUNOZ, MARIO  
664 W OAKLAND PARK BLVD  
WILTON MANORS, FL 33311 US

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

MUNOZ, MARIO PRES  
664 W OAKLAND PARK BLVD  
WILTON MANORS, FL 33311 US

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: MARIO MUNOZ

01/08/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MUNOZ, MARIO  
Address: 664 W OAKLAND PARK BLVD  
City-St-Zip: WILTON MANORS, FL 33311

Title: S  
Name: MUNOZ, JOANN R  
Address: 664 W OAKLAND PARK BLVD  
City-St-Zip: WILTON MANORS, FL 33311

Title: VP  
Name: MUNOZ, TOMAS J  
Address: 664 W OAKLAND PARK BLVD  
City-St-Zip: WILTON MANORS, FL 33311

Title: VPT  
Name: MUNOZ, JR, MARIO  
Address: 664 W OAKLAND PARK BLVD  
City-St-Zip: WILTON MANORS, FL 33311

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: MARIO MUNOZ

PRES

01/08/2010

Electronic Signature of Signing Officer or Director

Date