SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P92000014961 (6)

PHOTO CAMERA SERVICE, INC.

FILED Aug 12 1997 8:00am Secretary of State



Principal Place	e of Business	Mailing Address		I mailbat ata mana 14844 88141 84411 6811	r marat fillt dines soria Beigt lift 1844
1650 N. MILITARY TRAIL 1650 N. MILITARY TRAIL					
WEST PALM BEACH FL 33405 WEST PALM BEACH FL :			405	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	3a. Date of Last Report
				•	
2 PrincipateDi	Memorrobae Bud.A	1 20 Marinett difference	150 B W A	12/30/1992 1 4. FEI Number	05/29/1996
13787	1012220101652 10400,11 3., 71 33409			65-0378993	Applied For Not Applicable
Sulte, Apt.		26 (<i>W.P.B.</i> , 7/ Suite, Apt. #, etc.	20407	00-00/0990	¢0.75
22	., 000.	27		Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pai	
24	25	29	30	Personal Property Tax due June	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					listered Agent
PALENCIA, NIURKA 81 Name					
165	O N. MILITARY TRAIL	acc #0 D Roy Nurther in Not An Antahi	104		
WEST PALM BEACH FL 33405 82 Street Address F O Box Nuriber is Not Acceptable A 1					
			83		
				A	
			84 9 JEST	From Beach	FL 85 33209
11 Purguent to the provisions of Species 607 0502 and 607 1508 Engide Statutes the above paned composition submits this statement for the purpose of changing its registered.					
office or re	egistered agent, or both, in the State	of Florida. Such change was at	ithorized by the corporati	ion's board of directors. I hereby accep	t the appointment as registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent a gnature required when reinstating) DATE					
12.	OFFICERS AND	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	Palencia, Niurka		1.2 NAME		
STREET ADDRESS	801 EL PRADO		1.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 33405	5	1.4 CITY - ST - ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
CITY-ST-ZIP		•	2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-S1-ZIP		
TITLE		DELFTE	4.1 TITLE		Change Addition
NAME			4. 2 NAME	•	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DEFELE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		į
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		1
STREET ADDRESS			6.3 STREET ADDRESS)
CITY-ST-ZIP			6 4 CITY-ST-ZIP		
14. I do hereb	y certify that the information supplied	d with this filing goes not qualify	for the exemption stated	in Section 119.07(3)(i), Florida Statutes	. I further certify that the
14. I do hereby certify that the information supplied with this filing goes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual eport or supplemental argued 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 exporation or the receiver or rustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 in changed, or on an attachment with an address.					