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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Motham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000027919 (8)

PHOTO GENIE, INC.

FILED Apr 03 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address		T FROM HERDI AND HONDER HAND REPORT MOTHER ENGLISHED FOR THE PROPERTY TO FAIL HOURS				
11869 EAST COLONIAL DRIVE CRLANDO FL 32826 US		11869 EAST COLONIAL DRIVE ORLANDO FL 32928-4723 US						
				3. Date Incorporated 04/15/1993	d or Qualified	3a. Date of 02/20/1		port
~~~~	Place of Business	2a. Mailing Address		4. FEI Number			<del></del>	olied For
Suite, Apt	t at zato	Suite, Apt. #, etc.		59-3183596		80		Applicable
2	i. #, <del>C</del> (C	27		5. Certificate of State	us Desired		Fee Rec	dditional quired
City & Str	afG	City & State		6. Election Campaig	n Financing	\$	5.00	May Be
23		28		Trust Fund Contri		<del></del>	Added to	
<i>Z</i> ip □3	Country	Zip	Country	8. This corporation i		ntangible tax u Yes 🔲 No		199.032,
4	25 9. Name and Address of Curren	29   N Registered Agent	[30]	Florida Statutes  10. Name and Addre				
11. Pursuar	AM FL-33101  It to the provisions of Sections 607.050  registered agent, or both, in the State am familiar with, and accept the oblig-	n2 and 607, 1508, Florida Statu of Florida Such change was alions of, Section 607,0505, F	nes, the above-hamed c authorized by the corpo	ANTATION corporation's board of directors.		FL 85	32	3 スフ
SIGNATURE	Styr atms, typed or pertied name of registered age	ent and title if applicable (NC	DTE: Registered Agent signature re	equired when reinstating)		DATE		
	Styrature, typist or pertied ratino of registered age OFFICERS AN	D DIRECTORS	DTE: Registered Agent signature re	equired when reinstating) ADDITIONS/CHAN	IGES TO OFFIC	ERS AND DIR		
<b>12</b> .	Styrution, typied or productrane of registered age OFFICERS AN		13. 1.1 TITLE		IGES TO OFFIC	ERS AND DIR	ECTORS Change	
12. Hilf Name	Sty alone, typed or profes rates of regulated age OFFICERS AN P KATZ, GENE	D DIRECTORS	13. 1.1 TITLE 1.2 NAME		IGES TO OFFIC	ERS AND DIR		
<b>12.</b> Thee Name Street Address	OFFICERS AN  P KATZ, GENE 12854 WATERHAVEN CIRCLE	D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		IGES TO OFFIC	ERS AND DIR		
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I do nereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: