## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P93000085907 (2) **DOCUMENT #** 

PHOTOGRAPHY, INC							
AVE	1200 COLLINS AVE SUITE 207						
SUITE 207 MIAMI BEACH FL 33139  SUITE 207 MIAMI BEACH FL 331:		139				e of Last Report <b>)5/01/1995</b>	
oipal Place of Business 2a. Mailing Address				4. FEI Number 65-0454112		Applied For Not Applicab	
etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		<b>*</b> • • • •	Additional lequired
City & State		Oty & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Country	Zıp	F		8. This corporation has liability for intangible tax under s 199.032.  Florida Statutes			
L		1 - 1 - 1 - 1		10. Name and Address of New	Registere	d Agent	
			Name				
DEMARI, JOHN C 1200 COLLINS AVE SUITE 207		82	Street Add	dress (P.O. Box Number is Not Accept	able)		
		93	ļ				
MIAMI BEACH FL 33139			City		F	85 Zip	Code
		NOTE Fagstered Age	nt signature गरेच्य	red when reinstating) ADDITIONS/CHANGES 10 O	DATE FFICERS A	ND DIRECTO	RS IN 12
and the second second second second	DELETE					Change	Addi
DEMARI, JOHN C		1.2 NAME					
% 1200 COLLINS AVE SUITE 207		13STREE	T ADDRESS				
MIAMI BEACH FL 33139						Change	Add
	Ulough					الم المالي	
			T ADDRESS				
DELETE		3 1 TITLE				Change	☐ Add
			1				
	T DELETE					Change	Add
	L. J DECCTE	li i	i i				_
	DELETE	5 1 HTL				☐ Change	DDA 🔲
		5.2 NAMI	- 1				
			ET ADDRI SS				
	Business  AVE  EL 33139  For Elements  Country  25  9. Name and Address of C  IOHN C LINS AVE  ACH FL 33139  The provisions of Sections 607 agent, or both, in the State of and accept the obligations of OFFICER  DPST  DEMARI, JOHN C  % 1200 COLLINS AVE	Business  AVE  1200 COLLINS AVE SUITE 207  MIAMI BEACH FL 33  28. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip  29. Name and Address of Current Registered Agent  JOHN C  LINS AVE  ACH FL 33139  The provisions of Sections 607,0502 and 607,1508, Florida State agent, or both, in the State of Florida. Such change was authorized accept the obligations of, Section 607,0505, Florida State bar for penils from a choole beckers and be displayed to the Collins AVE OFFICERS AND DIRECTORS  DPST  DEMARI, JOHN C % 1200 COLLINS AVE SUITE 207  MIAMI BEACH FL 33139  DELETE	AVE 1200 COLLINS AVE SUITE 207 MIAMI BEACH FL 33139  DO OF ELISTROSS 26. Mailing Address 26. Suite, Apt #, etc.  27	Business Mailing Address  AVE 120 COLLINS AVE SUITE 207  MIAMI BEACH FL 33139  MIAMI BEACH FL 33139  Ze. Mailing Address  Ze. Mailing A	Business  Malling Address  AVE  1200 COLLINS AVE SUITE 207  MIAMI BEACH FL 33139  3. Date incorporated or Qualified 12/16/1993  4. FEI Number 25/46/1993  3. Date incorporated or Qualified 12/16/1993  4. FEI Number 65-0454.112  Solite, April in etc.  Solite, April in etc.  Country  7p  Country  7p  Country  8. This compaging Financing 1 rust Fund Contribution  Country  7p  Country  8. This compaging Financing 1 rust Fund Contribution  100 Name and Address of Current Registered Agent  100 Name and Address of Current Registered Agent  100 Name and Address of Current Registered Agent  100 Name and Address of Naw  81 Name  100 Name and Address of Name  82 Stroot Address (P.O. Box Number is Not Accept 1 rayered, or both, in the State of Florids Such change was entirerized by the corporation's board of dectors. It hereby accept the agent all accept the obligations of, Section 607.0506, Florids Statutes, the above named convention submits this statement for the pained accept the obligations of, Section 607.0506, Florids Statutes.  1 Thild 1 PARKET 1 ADDRESS  2 ADDITIONS/CHANGES TO O  1 Thild 1 PARKET 1 ADDRESS  2 ADDITIONS/CHANGES TO O  1 Thild 1 PARKET 1 ADDRESS  2 ADDITIONS/CHANGES TO O  1 OFFICE 1 Thild 2 PARKET 1 ADDRESS  3 SIREH ADDRESS  4 COLY- ST-2P  1 DELETE  3 TAME 3 SIREH ADDRESS  4 COLY- ST-2P  1 OFFICE 1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 OFFICE 1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 ADDRESS  4 COLY- ST-2P  1 Thild 4 PARKET 1 AD	Resimble  Note   1200 COLLINS AVE   SUITE 207   MAMIN BEACH FL 30139   S. Date Incorporated or Qualified   Sa. Do 12/16/1993   Solit, April a, etc.   Solit, Apr	No. 1200 COLINS AVE SUITE 207  PLANTING COLINS AVE SUITE 207  AMAING Address 20 MIAM BEACH FL 33139  3. Date incorporated or Qualifice 3a. Date of Last Fie 12/16/1993

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. Ffurther 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 coath that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 50 on an attachment with an address.

6 1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CHTV - \$1 - ZIP

SIGNATURE:

1003

NAM:

\$18c11 A00/055

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

JOHN DEMARI,

CR2E034 (12/95)