## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000086363 (7)

BERK PHOTOGRAPHY, INC.

| Principal Place of Business | Mailing Address       |
|-----------------------------|-----------------------|
| 1507 20TH AVENUE WEST       | 1507 20TH AVENUE WEST |

## **FILED** May 08 1998 8:00am Secretary of State



| Principal Place of Business            |                                   | Mailing Address                         |                            |                      |  | /// <b>18/8</b> / 18/10 20/10 40/16 50/10 40/1                |                |
|--|-----------------------------------|---|----------------------------|----------------------|--|---|----------------|
| 1507 20TH AVENUE WEST                  |                                   | 1507 20TH AVENUE V                      | VEST                       |                      |  |   |                |
| PALMETTO FL 34221 PALMETTO FL 34221    |                                   |   | DO NOT WRITE IN THIS SPACE |                      |  |   |                |
|  |                                   |   |                            |                      | 3. Date Incorporated or Qualified  | . IN THIS STACE   |                |
|  |                                   |   |                            |                      | 12/16/1993   |   |                |
| 2. Principal Place of Busin            |                                   | 2a. Mailing Address                     | )                          |                      | 4. FEI Number  | Applied   | For            |
| 21 1507-20 Avec<br>Suite, Apt. #, etc. | <u></u>                           | 26 /507 20 Ave W<br>Suite, Apt. #, etc. |                            | 65-0456399           |  |   |                |
| 22 City & State                        |                                   | 27                                      |                            |                      | 5. Certificate of Status Desired   | \$8.75 Addition   |                |
| 23 Palmetto, FL                        |                                   | City & State 28 Palmetto, FL            |                            |                      | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution   |   |                |
| Zip<br>24 34221                        | Country 71CA                      | Zip                                     | Cour                       |                      | 8. This corporation owes or has pa   |   | le             |
|  | 25 USA<br>and Address of Curren   | 1 Registered Agent                      | 30 2                       | sA                   | Personal Property Tax due June  10. Name and Address of New Re   |   |                |
| BERK, TAMMY                            |                                   |   | 1                          | 81 Name              | TO. THE STATE OF T | Sistered Apolit   | -              |
| 1507 20TH AV                           |                                   |   | ļ,                         | 82 Street Add        | dress (P.O. Box Number is Not Acceptal   | -le)  |                |
| PALMETTO FL                            |                                   |   | [                          | 51 SHEEL AU          | uress (F.O. Box Number is Not Acceptal   | ле)   |                |
|  |                                   |   | [1                         | B3                   |  | · · · · · · · · · · · · · · · · · · ·                         |                |
|  |                                   |   | 1                          | 84 City              |  | <b>85</b> Zip Code  |                |
| 44 Durament to the province            | on of Continue CO7 DEO            | 2 CO2 1500 Fb Ot                        | 1 1                        | <u> </u>             |  |   |                |
| onice or registered age                | ent, or both, in the State        | of Florida. Such change wa              | as authorized              | by the corpora       | rporation submits this statement for the pation's board of directors. I hereby acce  | ourpose of changing its registed the appointment as registed. | stered<br>ered |
| •                                      | n, and accept the obliga          | itions of, Section 607.0505,            | Florida Statu              | ites.                |  | _   |                |
| SIGNATURE Signature, lyped of          | r printed name of registered ages | nt and little if applicable (f          | NOTE: Registered           | Agent signature requ | urod when reinstating)   | DATE  | _              |
| 12.                                    | OFFICERS AND                      | DIRECTORS                               | 13.                        |                      | ADDITIONS/CHANGES TO OFFIC   | ERS AND DIRECTORS IN 1  | 12             |
| TITLE PSTD                             |                                   | ☐ DELETE                                | 1.1 TOTA                   | E                    |  | Change A  | Addition       |
| NAME BERK, T/                          |                                   |   | 1.2 NAN                    | AE                   |  |   | 2              |
|  | H AVENUE WEST                     |   | 9                          | EET ADDRESS          |  |   | ŭ              |
| CITY-ST-ZIP PALMET                     | O FL 34221                        | DELETE                                  | 1.4 CITS<br>2.1 TITL       | r-ST-ZIP             |  | Change Ela  | Addition       |
| NAME                                   |                                   |   | 2.1 HTL<br>2.2 NAM         |                      |  | ☐ Change ☐ A  | Addition C     |
| STREET ADDRESS                         |                                   |   |                            | EET ADDRESS          |  |   |                |
| CITY-ST-ZIP                            |                                   |   |                            | Y-ST-ZIP             |  |   |                |
| TITLE                                  |                                   | DELETE                                  | 3.1 TITL                   | <del></del>          |  | ☐ Change ☐ A  | Addition       |
| NAME                                   |                                   |   | 3.2 NAM                    | 1E                   |  |   |                |
| STREET ADORESS                         |                                   |   | 3.3 STR                    | EET ADDRESS          |  |   |                |
| CITY-ST-ZIP                            |                                   |   |                            | Y-ST-ZIP             |  |   |                |
| TITLE                                  |                                   | L DELETE                                | 4.1 TITL                   |                      |  | ☐ Change ☐ A  | Addition       |
| NAME                                   |                                   |   | 4.2 NA                     |                      |  |   |                |
| STREET ADDRESS                         |                                   |   |                            | EET ADDRESS          |  |   |                |
| CITY-ST-ZIP<br>TITLE                   |                                   | DELETE                                  | 4.4 CHY<br>5.1 THTL        | r ST-ZIP             |  | ☐ Change ☐ A  | Addilion       |
| NAME                                   |                                   | L. Prette                               | 5.1 NAM                    |                      |  | L Oliange Lik   | Mailinn        |
| STREET ADORESS                         |                                   |   |                            | EET ADDRESS          |  |   |                |
| CITY-ST-ZIP                            |                                   |   |                            | -ST-ZIP              |  |   | •              |
| TITLE                                  |                                   | DELETE                                  | 6.1 TITU                   |                      | P1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -   | Change A  | Addition       |
| NAME                                   |                                   |   | 6.2 NAM                    | IE                   |  |   |                |
| STREET ADDRESS                         |                                   |   | 6.3 STRE                   | EET ADDRESS          |  |   |                |
| CITY-ST-ZIP                            |                                   |   |                            | - ST - ZiP           |  |   |                |
| 9.4 I hereby certify that the          | information supplied wit          | h this filing does not qualify          | for the aven               | antion alated is     | Coction 110 07/2Vi) Florido Statutos I   | forestern a monthly the salaba a findamen                     |                |

Indicated on this annual report or supplied with this filling does not quality 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.