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

PROFIT CORPORATION **ANNUAL REPORT**

1997

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400030070 (4)

FOTO WORLD AND SOUND, INC.

Principal Place of Business Mailing Address 1627 WASHINGTON AVENUE 1627 WASHINGTON AVENUE MIAMI BEACH FL 33139 MIAMI BEACH FL 33139-3106 3. Date Incorporated or Qualified 3a. Date of Last Report 04/20/1994 04/16/1996 Principal Place of Business Mailing Address 4. FEI Number 2a. Applied For 65-0483689 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, X Yes No 24 25 29 30 Florida Statutes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MASHAL, SHAUL **1627 WASHINGTON AVENUE** Street Address (P.O. Box Number is Not Acceptable) 82 MIAMI BEACH FL 33139 вз City 84 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept 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 signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) (96/6) 13. PSTD DELETE Addition Change TITLE. 1.1 TITLE MASHAL, SHAUL NAME 1.2 NAME **1627 WASHINGTON AVENUE** STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33139 CITY-ST-ZIP 1.4 CHY-S1-ZIP DELETE TITLE 21 TITLE ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE TITLE 3 1 TITLE Change ___ Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Change TITLE 4 1 TITLE Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CiTY-ST-ZIP

5.4 CITY - ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

14. I do hereby 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 an inged, or on an attachingent with an indicress. V-14-P7

205 8 21-8 OUL

Change

___ Addition

FILED

May 01 1997 8:00am

Secretary of State