

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

FILED

Apr 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000062042 (4)

1. Corporation Name

SURF CAMERA & 1 HOUR FOTO, INC.

Principal Place of Business

9473 HARDING AVENUE
SURFSIDE FL 33154

Mailing Address

9473 HARDING AVENUE
SURFSIDE FL 33154

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/23/1994

4. FEI Number

65-0514332

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

ALGAZE, IKE
9473 HANDING AVE
SURFIDE FL 33154

10. Name and Address of New Registered Agent

81 Name Kruger, Lydia
82 Street Address (P.O. Box Number is Not Acceptable)
5569 S.W. 113 Ave
83
84 City? Cooper City FL 85 Zip Code 33330

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 *Lydia Kruger, President*

(NOTE: Registered Agent signature required when reinstating)

4/6/98

12. OFFICERS AND DIRECTORS

TITLE	P	☒ DELETE
NAME	ALGAZE, ISSAC	
STREET ADDRESS	9473 HARDING AVENUE	
CITY-ST-ZIP	SURFSIDE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	☐ Change ☒ Addition
1.2 NAME	Kruger, Lydia	
1.3 STREET ADDRESS	5569 S.W. 113 Ave	
1.4 CITY-ST-ZIP	Cooper City, FL 33330	
2.1 TITLE		☐ Change ☒ Addition
2.2 NAME	Kruger, Steven W.	
2.3 STREET ADDRESS	5569 S.W. 113 Ave	
2.4 CITY-ST-ZIP	Cooper City, FL 33330	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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 changed, or on an attachment with an address.

SIGNATURE *Lydia Kruger, President*

4/6/98 954-451-1800

CR2E034 (10/97)