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FILED
May 12 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 # P95000037898 (0)
1. Corporation Name
PHOENIX PHOTOGRAPHY INC.

Principal Place of Business
15225 S.W. 156 TERR.
MIAMI FL 33187

Mailing Address
15225 S.W. 156 TERR.
MIAMI FL 33187

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified
05/11/1995
4. FEI Number
65-0591959
5. Certificate of Status Desired
6. Election Campaign Financing
Trust Fund Contribution
7. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

8. Name and Address of Current Registered Agent
FERNANDEZ, ANA C
15225 S.W. 156 TERR.
MIAMI FL 33187

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 Ana C Fernandez
Signature typed or printed name of registering agent and title if applicable (NOTE: Registering Agent signature required when reinstating) DATE 4-1-98

12. OFFICERS AND DIRECTORS
TITLE PD
NAME FERNANDEZ, ANA C
STREET ADDRESS 15225 S.W. 156 TERR.
CITY-ST-ZIP MIAMI FL 33187
TITLE STD
NAME FERNANDEZ, CARLOS A
STREET ADDRESS 15225 S.W. 156 TERR.
CITY-ST-ZIP MIAMI FL 33187
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
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 Ana C Fernandez Ana C Fernandez 4-1-98

CB2E034 (10/97)