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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000072598 (2)

PHOTO VEND NETWORK, INCORPORATED

	· · · · · · · · · · · · · · · · · · ·
Principal Place of Business	

Mailing Address

2894 AVON COURT PALM HARBOR FL 2894 AVON COURT

PALM HARBOR FL 34684-4701

FILED Apr 28 1997 8:00am Secretary of State



FALM FIANDON	i rt	FALM HARDON FL 3400	17/01							
						3. Date Incorporated or Qualified 09/18/1995	3a. Date of 05/28/1		port	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Арр	lied For	
21 26						59-3351633		Not	Applicable	
Suite, Apt. #, etc.						5. Certificate of Status Desired	□ \$ {	.75 Ad	ditional	
22		27	27			of Certificate of Statos Desireo		Fee Req	ulred	
City & State	0	City & State				6. Election Campaign Financing	\$	5.00 N	lay Be	
23		28				Trust Fund Contribution		Added to	Fees	
Zip	Country	Zip		Country		8. This corporation has liability for in	tangible tax u		199.032,	
24	25	29	30	30		Florida Statutes Yes No				
	9. Name and Address of Curr	ent Hegistered Agent		81	I No	10. Name and Address of New Rec	istered Agen	<u> </u>		
	xander, ray j			[01	Name					
2894 AVON COURT				82 Street Address (P.O. Box Number is Not Acceptable)						
PALM HARBOR FL						· · · · · · · · · · · · · · · · · · ·				
				63						
				84	City		FL 85	Zip Ci	ode	
11. Pursuant i	to the provisions of Sections 607.09	502 and 607,1508, Florida Stat	utes, the	above	e-named corp	oration submits this statement for the po	rpose of char	ging its	registered	
office or re	egistered agent, or both, in the Sta	te of Florida. Such change was	authoriz	ed by	the corporati	on's board of directors. I hereby accep	t the appointm	ent as re	gistered	
	in armay yiti, and y cept the boll	galluns of, Section 607.0000, 1	iorida 3t	alute:	ə .	4.	17-9	フ		
SIGNATURE	Signature, transfer printed name or registered a	gent and title if applicable (NC	Offic Register	red Age	ent signature require	ad when reinstaling)	DATE			
12.	OFFICERS A	ND DIRECTORS	13	i.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIR	CTORS	IN 12	
TITLE	PTSM	☐ DELETE	1.1	TITLE				hange	Addition	
NAME	ALEXANDER, RAY J		1.2	NAME						
STREET ADDRESS	AAA AMAMAAAAA		1.3	STREET	ADDRESS					
CITY - \$1 - 7/P	PALM HARBOR FL			CITY-S	ST-ZIP					
TITLE		☐ DELETE	2.1	TITLE				hange	Addition	
NAMÉ	2		2.2	NAME					į	
STREET ADDRESS	2.3		STREET	ADDRESS				ĺ		
CHY-ST-ZIP			2.4	2. 4 CITY-ST-ZIP						
TITLE		DELETE	31	3 1 TITLE				hange	Addition	
NAME	1		3.2	NAME					ļ	
STREET ADDRESS			33	STREET	ADDRESS					
CITY-ST ZIP			3.4.	CITY-S	ST-ZIP	:				
TITLE		☐ DELETE	4.1	TITLE				hange	Addition	
NAME			4. 2	NAME					1	
STREET ADDRESS			4.3	STREET	ADDRESS					
CITY-ST-ZIP			4.4	CITY-S	ST-ZIP					
TITLE		☐ DELETE	5.1	TITLE				hange	Addition	
NAVIE			5.2	NAME						
STREET ADDRESS			5.3	STAEET	ADDRESS					
CITY - S1 - ZIF			5.4	CITY-S	57 - ZIP					
TITEF		☐ OELETE	6.1	TITLE				hange	Addition	
NAME			6.2	NAME						
STHEET ADDRESS			6.3	STREET	ADDRESS					
City-St-73P				CITY-S	1				İ	
	over costifu that the information cumpl	ad with this filing door not gue				Lin Section 119 07/3Vi) Florida Statutos	Liuther cost	fu that th		

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 changes for on an attachment with an address.

SIGNATURE:

THE AND THE OF PHINTED NAME OF SIGNING OFFICER OF DIRECTOR

813-413-322-1