SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # **P95000081815 (9)**

1. Corporation Name
FRESH LOOK PHOTOGRAPHY, INC.

Principal Place of Business	Mailing Address
~~17021 NORTH BAY ROAD APT. 207~~ ~~MIAMI FL 33160~~	~~17021 NORTH BAY ROAD APT. 207~~ ~~MIAMI FL 33160~~

3. Date Incorporated or Qualified: 10/25/1995
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 1304 B EAST ATLANTIC BLVD	26 1304 B EAST ATLANTIC BLVD
22 Suite, Apt. #, etc	27 Suite, Apt. #, etc
23 City & State: POMPANO BEACH FL	28 City & State: POMPANO BEACH FL
24 Zip: 33064 25 Country: US	29 Zip: 33064 30 Country: US

4. FEI Number: 65-0615720 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~BERMEO, ARMANDO~~ ~~17021 NORTH BAY ROAD APT. 207~~ ~~MIAMI FL 33160~~	81 Name: PAVAN, GERALDINE 82 Street Address (P.O. Box Number is Not Acceptable): 17021 NORTH BAY ROAD APT #207 83 84 City: MIAMI FL 85 Zip Code: 33160

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: X [signature] DATE: 6-13-96
Signature of the person appointed as registered agent and title, if applicable (NOTE: Registered Agent signature required when filing)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~PD~~ ~~BERMEO, ARMANDO~~ ~~17021 NORTH BAY ROAD APT. 207~~ ~~MIAMI FL 33160~~	☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VD~~ PAVAN, GERALDINE 17021 NORTH BAY ROAD APT. 207 MIAMI FL 33160	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	PD	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	VP GALZANO, GENNARO 10805 NW 40TH STREET CORAL SPRINGS, FL 33065	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X [signature] 6-13-96 (305) 354-2292
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
GERALDINE PAVAN