Feb 16, 1999 8:00 am Secretary of State

02-16-1999 90027 025 \*\*\*150.00

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

**PROFIT CORPORATION** ANNUAL REPORT 1999



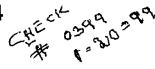
FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600002494 1. Corporation Name

FRANCIS DESIGN AND PHOTOGRAPHY, INC.



		A.	6.		
Principal Place	e of Business	Mailing Address	·	I S DOLLAND 160 LUSTON USTILS MODES ONS	it Oktif 40iti bötib met state (oss eter som
2104 WEST 621	nd street	2104 WEST 62ND STREET			`
HIALEAH FL 33016 HIALEAH FL 33016			DO NOT WRIT	E IN THIS SPACE	
				3. Date Incorporated or Qualifed	<u> </u>
				01/09/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0643597	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
22		27 Ott 8 Ott 1			
City & State	e	City & State		6. Election Campaign Financing  Trust Fund Contribution	Added to Fees
Zip	Country	<b>28</b> Zip	Country	8. This corporation owes the curre	
24	25	29 30	¬ '	Personal Property Tax.	∏Yes ∏No
241	9. Name and Address of Curren			10. Name and Address of New R	egistered Agent
			81 Name	e e	<del></del>
	MINIA, ROSARIO		82 Street A	Address (P.O. Box Number is Not Accepta	ble) .
	) W 16TH AVENUE STE. 2				
HIAL	EAH FL 33012		83		
			84 City	<del></del>	85 Zip Code
11, Pursuant	to the provisions of Sections 607.050.	2 and 607.1508, Florida Statutes,	the above-named of	corporation submits this statement for the	purpose of changing its registered
11. Pursuant office or ragent. I a	registered agent, or both, in the State im familiar with, and accept the obligation	of Florida. Such change was auth tions of, Section 607.0505, Florida	orized by the corporal Statutes.		ourpose of changing its registered the appointment as registered
office or n agent. I a SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligated states of the state of the	of Florida, Such change was auth tions of, Section 607.0505, Florida and title if applicable (NOTE: Re	orized by the corporations of the corporation of the corporations of the corporation of th	ration's board of directors. I nereby accep	UO = 9 9
office or reagent. I a SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation of the state of registered agent of the state of the stat	of Florida. Such change was auth tions of, Section 607.0505, Florida	orized by the corporal Statutes.	ration's board of directors. I nereby accep	the appointment as registered
office or ragent. I a SIGNATURE  12. TITLE	egistered agent, or both, in the State m familiar with, and accept the obligated signature, typed or Brinted name of registered agent OFFICERS AN	of Florida, Such change was auth titols of, Section 607.0505, Florida and title if applicable (NOTE: Re	orized by the corpo a Statutes.  gistered Agent signature re  13.	ration's board of directors. I nereby accep	DATE  CICERS AND DIRECTORS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME	egistered agent, or both, in the State im familiar with, and accept the obligated signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA	of Florida, Such change was auth titols of, Section 607.0505, Florida and title if applicable (NOTE: Re	orized by the corporal Statutes.  gistered Agent signature re  13.  1.1 TITLE  1.2 NAME	ration's board of directors. I nereby accep	DATE  CICERS AND DIRECTORS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida, Such change was auth titols of, Section 607.0505, Florida and title if applicable (NOTE: Re	orized by the corporal Statutes.  gistered Agent signature re 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ration's board of directors. I nereby accep	DATE  CICERS AND DIRECTORS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME	egistered agent, or both, in the State im familiar with, and accept the obligated signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA	of Florida, Such change was auth titols of, Section 607.0505, Florida and title if applicable (NOTE: Re	orized by the corporal Statutes.  gistered Agent signature re  13.  1.1 TITLE  1.2 NAME	ration's board of directors. I nereby accep	DATE  CICERS AND DIRECTORS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida and title if applicable. (NOTE: Re ID DIRECTORS	orized by the corporal Statutes.  gistered Agent eignature re 13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ration's board of directors. I nereby accep	DATE  Change Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida and title if applicable. (NOTE: Re ID DIRECTORS	orized by the corporal Statutes.  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 2.1 TITLE	ration's board of directors. I nereby accep	DATE  Change Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida and title if applicable. (NOTE: Re ID DIRECTORS	orized by the corporal Statutes.  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 2.1 TITLE 2.2 NAME	ration's board of directors. I nereby accep	DATE FICERS AND DIRECTORS IN 12 Change Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida and title if applicable. (NOTE: Re ID DIRECTORS	orized by the corporal Statutes.  13. 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	ration's board of directors. I nereby accep	DATE  Change Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida and title if applicable (NOTE: Re ID DIRECTORS)	orized by the corporal Statutes.  13. 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	ration's board of directors. I nereby accep	DATE FICERS AND DIRECTORS IN 12 Change Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida and title if applicable (NOTE: Re ID DIRECTORS)	onized by the corporal Statutes.  13. 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	ration's board of directors. I nereby accep	DATE FICERS AND DIRECTORS IN 12 Change Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida  thand title if applicable (NOTE: Re  ID DIRECTORS  DELETE  DELETE	onized by the corporal Statutes.  13. 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	ration's board of directors. I nereby accep	Change Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida and title if applicable (NOTE: Re ID DIRECTORS)	orized by the corporal Statutes.  13. 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	ration's board of directors. I nereby accep	DATE FICERS AND DIRECTORS IN 12 Change Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CONTROL OF THE PARTY OF	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida  thand title if applicable (NOTE: Re  ID DIRECTORS  DELETE  DELETE	orized by the corporal Statutes.  13. 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	ration's board of directors. I nereby accep	Change Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida  thand title if applicable (NOTE: Re  ID DIRECTORS  DELETE  DELETE	onized by the corporal Statutes.  13. 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	ration's board of directors. I nereby accep	Change Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida  thand title if applicable (NOTE: Re  ID DIRECTORS  DELETE  DELETE  DELETE	onized by the corporal Statutes.  13. 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 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	ration's board of directors. I nereby accep	Change Addition
office or ragent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE NAME TITLE TITLE NAME	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida  thand title if applicable (NOTE: Re  ID DIRECTORS  DELETE  DELETE	orized by the corporal Statutes.  13. 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	ration's board of directors. I nereby accep	Change Addition
office or raggent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida  thand title if applicable (NOTE: Re  ID DIRECTORS  DELETE  DELETE  DELETE	onized by the corporal Statutes.  13. 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	ration's board of directors. I nereby accep	Change Addition
office or raggent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida  thand title if applicable (NOTE: Re  ID DIRECTORS  DELETE  DELETE  DELETE	orized by the corporal Statutes.  13. 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	ration's board of directors. I nereby accep	Change Addition
office or raggent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State m familiar with, and accept the obligate Signature, typed or printed name of registered agent OFFICERS AN PSTD LOPEZ, NILSA 2104 WEST 62ND STREET	of Florida. Such change was authous of, Section 607.0505, Florida  thand title if applicable (NOTE: Re  ID DIRECTORS  DELETE  DELETE  DELETE	onized by the corporal Statutes.  13. 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	ration's board of directors. I nereby accep	Change Addition

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, with all other like empowered.

6.2 NAME 63 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS