## 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 # P96000094667

1. Corporation Name

CAMERA MARKETING CORP.

## **FILED** Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90094 036 \*\*\*150.00



Principal Place of Business Mailing Address								*** *****	
8271 N. PINE ISLAND ROAD TAMARAC FL 33321 8271 N. PINE ISLAND ROA TAMARAC FL 33321			D			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed	-		
						11/15/1996			
Principal Place of Business     Za. Mailing Address						4. FEI Number		_	olied For
21 26						65-0718223			Applicable
Suite, Apt. #, etc.						5. Certificate of Status Desired		5./5 A Fèè Ré	dditional
22 27									
City & State		City & State	28			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees			
Zip Country 25 2		Zip <b>29</b>	¬ '			8. This corporation owes the current year Intangible Personal Property Tax.			
	9. Name and Address of Cur	rrent Registered Agent				10. Name and Address of New Registe	red Ager	t	
			1	B1	Name				
GLASS, DANNY 8271 N. PINE ISLAND ROAD			1	82	Street Addre	ss (P.O. Box Number is Not Acceptable)			
TAM	IARAC FL 33321		-	83			_		
i			I.	84	Oth :		85	Zip C	ode
			'	84	City		⋷∟∣°°	2.00	000
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (NOTE AND DIRECTORS	: Registered A	gent	signature required	when reinstating) DATI ADDITIONS/CHANGES TO OFFICERS		RECTO	RS IN 12
TITLE	D	DELETE	1.1 TITL	E		ADDITIONO/OFFICE TO OFFICE IN		hange	Addition
NAME	GLASS, DANNY	_	1.2 NAN						
STREET ADDRESS	ACTA N. CINIC IOI AND DOAD		1.3 STR	EET A	ADDRESS				
CITY-ST-ZIP	TAMARAC FL 33321	_	1.4 CITY	r-ST-	ZIP				
ΠΠLE	D DELETE		2.1 T/TL	E			Π.	Change	Addition
NAME	GLASS, JODY	•	2.2 NAA	Æ		•			
STREET ADDRESS	8271 N. PINE ISLAND ROAI	D	2.3 STR	EET	ADORESS		_		
CITY-ST-ZIP	TAMARAC FL 33321		_	2.'4 CITY-ST-ZIP				Change	Addition
TITLE		☐ DELETE	3.1 TITL				υ,	zitatiye	☐ AQUIDO:1
NAME			3.2 NAN		DDDCC0				
STREET ADDRESS			3.4. CIT		ADDRESS 710				
CITY-ST-ZIP TITLE	<u> </u>	□ DELETE	4.1 TITL		-211			Change	☐ Addition
NAME									
STREET ADDRESS			4.2 NA	ME	I				
CITY-ST-ZIP	1				ADDRESS				
TITLE				EET A	1				
<del>-</del>		☐ DELETE	4.3 STR	EET /	1			Change	☐ Addition
NAME		☐ DELETE	4.3 STR 4.4 CITY 5.1 TITE 5.2 NAM	REET / Y-ST- LE //E	ZIP			Change	☐ Addition
NAME STREET ADDRESS		☐ DELETE	4.3 STR 4.4 CIT 5.1 TITE 5.2 NAM 5.3 STR	REET / Y-ST- LE AE	ADORESS			Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP			4.3 STR 4.4 CIT 5.1 TITE 5.2 NAM 5.3 STR 5.4 CIT	REET / Y-ST- E ÆE KEET /	ADORESS				
STREET ADDRESS		☐ DELETE	4.3 STR 4.4 CIT 5.1 TITE 5.2 NAM 5.3 STR	REET / Y-ST- E AE REET / Y-ST- E	ADORESS			Change 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

1/18/99 9N-711-0408