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

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90040 040 ***150.00

DOCUMENT #	P96000103971
1 Cornoration Name	1 0000010001

RANDY MILLER'S PHOTO-PRO INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

2736 NE 14TH ST #A FT LAUDERDALE FL 33304 2736 NE 14TH ST #A FT LAUDERDALE FL 33304

O NOT WRITE IN THIS SPACE

					DO NOT WATE IN THIS STACE		
					3. Date Incorporated or Qualifed 01/01/1997		
2 Principal P	lace of Business	2a. Mailing Address			4, FEI Number	1	Applied For
21	aco or Econisco	26			65-0719646	1	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75	Additional
22		27			5. Certifcate of Status Desired	Fee F	Required
City & State	e	City & State			6. Election Campaign Financing	\$5.0	May Be
23		28			Trust Fund Contribution	Added	to Fees
Zîp	Country	Zip	Count	у	8. This corporation owes the current year Ir	ntangible	
24	25	29	30		Personal Property Tax.	Yes	∯No
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New Registered	J Agent	
			8	1 Name		4,	
	MILLER, RANDY S			2 Street Add	ddress (P.O. Box Number is Not Acceptable)		
	NE 14TH ST #A			2 Oliver Add	in bod (1 .o. box realines) to recrease places,		
FT L	AUDERDALE FL 33304		8	3			
						- Top 7:	Codo
			8	4 City	FI	L 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the abo	ve-named corp	poration submits this statement for the purpose of	of changing i	ts registered
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was all	ithonzed b	v tne corporati	ion's board of directors. I hereby accept the appoint	ointment as i	registerea
	ill laminar with, and accept the obliga	mond of, duction correctly, risk					
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE.	Registered A	ent signature requir	ed when reinstating) DATE		
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D	☐ DELETE	1.1 TITLE			Change	B Addition
NAME	MILLER, RANDY S		1.2 NAM	<u> </u>			
STREET ADDRESS	\		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL 33304		1.4 CITY	ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE			Change	e Addition
NAME			2.2 NAM	≣			
STREET ADDRESS			2.3 STRE	ET ADDRESS			
CITY-ST-ZIP			2.4 CIT	-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change	e Addition
NAME			3.2 NAM	: I			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			3.4. CITY				
TITLE		☐ DELETE	4.1 TITLS			Change	e Addition
NAME		-	4. 2 NAM				
STREET ADDRESS				ET ADDRESS			
			4.4 CITY				
CITY-ST-ZIP		☐ DELETE	5.1 TITU			[] Change	e Addition
			5.2 NAM	1		·	
NAME			1	ET ADDRESS			
STREET ADDRESS			5.4 CITY				
CITY-ST-ZIP		☐ DELETE	6.1 TITL			Change	e Addition
TITLE		☐ DETEJE	6.2 NAM				
NAME							
STREET ADDRESS				ET ADDRESS			
	I		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 on the receiver or trustee empewered 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 or an altachment with an appears, with all other like empowered.