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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000057875 (1)

ECONO	DMY PASSPOR	T PHOTOS INC	C .	• •							
Principal Place of Business Mailing Address								-) i nominaka use sassi usasu massa dastik ada	IN UUNAN B INAN I	486 (1811) 186	B F B 1(1 1 0 B 1
4301 WEST KENNEDY BLVD. TAMPA FL 33609			4301 WEST KENNEDY BLVD. TAMPA FL 33609					DO NOT WRITE IN THIS SPACE			
								3. Date Incorporated or Qualified			
								06/30/1997			
	Place of Business		2a. Mailing Add	lress				4. FEI Number		Ar	plied For
			26					59-3458156			t Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 . Fee Re	
City of State			City & State					6. Election Campaign Financing	_	\$5.00	May Be
23			28				Trust Fund Contribution		Added	to Fees	
Zip	├ ¬	ountry	Zip		Count	try		8. This corporation owes or has pa			
24	25	-40	29		30			Personal Property Tax due June			No
		ddress of Current I	Registered Agent		- B	it i	Name	10. Name and Address of New Re	gistered A	gent	
ROGERSON, LINDA J 4301 WEST KENNEDY BLVD.						2		dress (P.O. Box Number is Not Acceptable)			
TAMPA FL 33609					8			555 (1.0. DOX Number is Net Acceptat			
					L _o	3					
					8	4	City		FL	85 Zip	Code
11. Pursuant office or agent. I a	to the provisions of registered agent, or am familiar with, and	Sections 607.0502 a both, in the State of accept the obligation	and 607.1508, Flor Florida Such cha ons of, Section 607	ida Statute nge was a '.0505, Flo	es, the about uthorized rida Statut	by by	-named corporation	oration submits this statement for the p on's board of directors. I hereby accep	urpose of out the appo	changing it intment as	s registered registered
SIGNATURE	Signature typed or resplec	I name of registered agent a	eldes/gge high bos	NOTE	Registered A		ol signature require	d when reinstaling)	DATE		
12.	Oldinatore, typida di printee	OFFICERS AND		(11012	13.	·Sc.	it agriculture recipires	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12
TITLE	D			ELETÉ	1.1 T/TLE	E				Change	Addition
NAME	ROGERSON, L	INDA J			1.2 NAM	E					į
STREET ADDRESS		ENNEDY BLVD.			1.3 STRE	ET A	ADDRESS				
City-ST-ZIP	TAMPA FL 336				1.4 CiTY	-ST	- ZIP				Ì
TITLE				ELETÉ	2.1 TITLE	E				Change	☐ Addition
NAME					2.2 NAM	Ε					
STREET ADDRESS					2.3 STRE	ET A	ADDRESS				
CITY-ST-ZIP					2. 4 CITY	/- SI	T-ZIP				
TITLE				ELETE	3.1 TITLE				T	Change	Addition
NAME					3.2 NAM	E					ļ
STREET ADDRESS					3.3 STRE	ET A	ADDRESS				
CITY-ST-ZIP		·			3.4. CITY	_	r- ZIP				
TITLE	ļ			ELETE	4.1 TITLE	•			L	Change	Addition
NAME	f				. 4.2 NAM	Æ	İ				
STREET ADDRESS					4 3 STRE	ET A	Address				
CITY-ST-ZIP				C) FTC	4.4 CITY		- ZIP		т	706	T Addition
TITLE	1		U	ELETE	5.1 TITLE		}		ι	Change	Addition
NAME					5.2 NAM						
STREET ADDRESS					5.3 STRE						
CITY-ST-ZIP				CLETE	5.4 CITY		- ZIP			Channa	Addition
TITLE			L	ELET E	6.1 TITLE		ŀ		t	Change	Addition
NAME					6.2 NAM		IDDATES				
STREET ADDRESS	1				6.3 STRE		ì				
CITY-ST-7IP	1				6.4 CiTY	- XI	- AP				1

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 trusted 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.

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E034 (10/97)

FILED

Mar 30 1998 8:00am

Secretary of State