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FILED
May 06 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000078246 (0)

1. Corporation Name
FOTO ZOOM, INC.

Principal Place of Business

2305 NORTHWEST 107 AVE
MIAMI FREE ZONE 1M1
MIAMI FL 33172

Mailing Address

2305 NORTHWEST 107 AVE
MIAMI FREE ZONE 1M1
MIAMI FL 33172

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/10/1997

4. FEI Number

65 - 0826728

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 2264 NW 87th AVE

Suite, Apt. #, etc.

22

City & State

23 MIAMI, FL

Zip

24 33172

Country

25

2a. Mailing Address

26 2264 NW 87th AVE

Suite, Apt. #, etc.

27

City & State

28 MIAMI, FL

Zip

29 33172

Country

30

9. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

JHANGIMAL, SONIA

82 Street Address (P.O. Box Number is Not Acceptable)

9425 SW 91st STREET

83

84 City

MIAMI

FL

85

Zip Code
33176

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

Sonia D. Jhangimal

04/20/98

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME JHANGIMAL, SONIA D
STREET ADDRESS 2305 NORTHWEST 107 AVE
CITY-ST-ZIP MIAMI FL 33172

TITLE PTD ☐ DELETE

NAME JHANGIMAL, SURESH
STREET ADDRESS 2305 NORTHWEST 107 AVE
CITY-ST-ZIP MIAMI FL 33172

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PTD ☒ Change ☐ Addition

1.2 NAME JHANGIMAL, SONIA D.
1.3 STREET ADDRESS 2264 NW 87th AVE
1.4 CITY-ST-ZIP MIAMI, FL 33172

2.1 TITLE PTD ☒ Change ☐ Addition

2.2 NAME JHANGIMAL, SURESH
2.3 STREET ADDRESS 2264 NW 87th AVE
2.4 CITY-ST-ZIP MIAMI, FL 33172

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 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.

SIGNATURE

Sonia D. Jhangimal

SONIA D. JHANGIMAL

04/20/98

305-591-1999

CR2E034 (10/97)