

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 30, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P97000107562**

1. Entity Name  
**WALTER HARRIS PHOTOGRAPHY AND VIDEO SERVICES, INC.**



Principal Place of Business  
6010 S. DIXIE HIGHWAY  
SO. MIAMI, FL 33143-5001

Mailing Address  
6010 S. DIXIE HIGHWAY  
SO. MIAMI, FL 33143-5001



03282005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0665681**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HARRIS, WALTER**  
**6010 S. DIXIE HIGHWAY**  
**SO. MIAMI, FL 33143-5001**

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	DPVP
NAME	HARRIS, WALTER
STREET ADDRESS	6010 S. DIXIE HIGHWAY
CITY-ST-ZIP	SO. MIAMI, FL 331435001
TITLE	DST
NAME	HARRIS, EDA S
STREET ADDRESS	6010 S. DIXIE HIGHWAY
CITY-ST-ZIP	SO. MIAMI, FL 331435001
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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**DO NOT WRITE  
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Walter Harris **WALTER HARRIS** 3/28/05 305-662-4884  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #