PROFIT CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P98000037771

, Corporation Name J DTT E ODIOVET DUOTOODADIN J

## FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90188 016 \*\*\*150.00

LITTE	CRICKET PHOTOGRAPHY, IN	IC.			
Principal Plac	e of Business	Mailing Address		a i Battant sin reier serit antit antit mutti antit	tå tifet tåfte täätt lässt etan enas
506 OAK VIEW	DRIVE	506 OAK VIEW DRIVE			
TAVARES FL 32778 TAVARES FL 32778					
*				DO NOT WRITE IN THE  3. Date incorporated or Qualified	S SPACE
				04/22/1998	
2 Orloginal F	Noce of Business	2a. Mailing Address		4, FEI Number )	Applied For
2. Principal F	Place of Business 7 CHESTERHIL GR	2a. Malling Address Box	598	1 29-2/123/115	Not Applicable
	#, etc.	Suite, Apl. #, etc.	<del> </del>	1 27 24 25 24 75	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	te	City & State		s. Election Campaign Financing	\$5.00 May Be
23 MT.	Dolf FL	28 MT DORA	4FL -	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	a. This corporation owes the current year in	
24 32/5	57 25 USA	29 3375U 30	us A	Personal Property Tax.	Yes No
	<ol><li>Name and Address of Current</li></ol>	Registered Agent		10. Name and Address of New Registere	d Agent
( CE	KOWITZ, IVAN M		81 Name		
	N. MILLS AVENUE		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
	ANDO FL 32803		83		
	PANDO I E GEOGO		83		1
			84 City	F	85 Zip Code
	1- the condellar of Condellar 607 0500	and £07 1500 Florida Statutos	the show served com	oration submits this statement for the purpose of	_   _
office or r	resistered agest of both in the State of	f Florida. Such channe was suib	YORIZANI I'V THA COMIONAU	on's board of directors. I hereby accept the appoint	pintment as registered
agent. I a	im familiar with, and accept the obligation	ons of, Section 607.0505, Florida	a Statutes.		
SIGNATURE	Classical part of subject parts of the bread poem	and little if anotherable (MOTF: Re	eristanski Artent skrautren reflejte	d when reinstating) DATE	
	Signature, typed or printed name of registered agent		gistered Agent signature require	d when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
12.	OFFICERS AND		gistered Agent signature required  13. 1.1 DTLE		ND DIRECTORS IN 12
12.	OFFICERS AND	DIRECTORS	13.		ND DIRECTORS IN 12  Change Addition
12.	OFFICERS AND	DIRECTORS	13.		ND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS	OFFICERS AND DP SHORT, JASON S	DIRECTORS	13. 1.1 DTLE 12 NAME		ND DIRECTORS IN 12
12. TITLE	DP SHORT, JASON S P.O. BOX 598	DIRECTORS	13. 1.1 TITLE 12 NAME 13 STREET ADDRESS		
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756	DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		ND DIRECTORS IN 12 Change Addition Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE	DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE		ND DIRECTORS IN 12 Change Addition Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE	DIRECTORS	13. 1.1 TITLE 12 NAME 1.2 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		Citizando — verment
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598	DIRECTORS	13. 1.1 TITLE 12 NAME 1.2 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		ND DIRECTORS IN 12 Change Addition Change Addition Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598	DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598	DIRECTORS  DELETE	13. 1.1 TITLE 12 NAME 1.2 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE		
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598	DELETE  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME		Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598	DIRECTORS  DELETE	13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 2.0 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 12 NAME 13 STREET ADDRESS		
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598	DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.2 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		Change Addition
12. TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598	DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.2 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598	DELETE  DELETE  DELETE	13. 1.1 TITLE 12 NAME 1.2 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598	DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE		Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598	DELETE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME		Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598	DELETE  DELETE  DELETE	13. 1.1 TITLE 12 NAME 1.2 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 6.5 STREET ADDRESS 6.6 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS		Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598	DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.9 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4. CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP		Change Addition  Change Addition  Change Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598 MT. DORA FL 32756	DELETE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE  6.1 TITLE  6.2 NAME  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP  6.1 TITLE		Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598 MT. DORA FL 32756	DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE  6.2 NAME		Change Addition  Change Addition  Change Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	OFFICERS AND DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598 MT. DORA FL 32756	DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE  6.2 NAME  6.3 STREET ADDRESS		Change Addition  Change Addition  Change Addition
12.  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE	OFFICERS AND DP SHORT, JASON S P.O. BOX 598 MT. DORA FL 32756 ST SHORT, CELESTE P.O. BOX 598 MT: DORA FL 32756	DELETE  DELETE  DELETE  DELETE  DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		Change Addition  Change Addition  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 account that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of 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 amattaghment with an addless, with all other like empowered.

SIGNATURE.

HOMATION AND TYPES OF PRINTED NAME OF SURVING DESCEND OF PROPERTY

99 352-735-904D

= ;;;