PROFIT CORPORATION ANNUAL REPORT 1000



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 07, 1999 8:00 am Secretary of State 04-07-1999 90107 015 ***150.00

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DOCUMENT # P98000045422				
FRANK DIENST PHOTOGRAPHY, INC.				
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Principal Place of Business	Mailing Address	<u> </u>	Contribut His teret rabbt Stein anne Abres an-	3
3940 PINETOP BLVD. 3940 PINETOP BLVD.				
TITUSVILLE FL 32796	TITU\$VILLE FL 32796		DO NOT WRITE IN TH	IS SPACE
Ì			3. Date Incorporated or Qualifed	
<u> </u>			06/04/1998	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For Not Applicable
21	Suite, Apt. #, etc.		24-3512445	\$8.75 Additional
Suite, Apt. #, etc.	27		5-Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
ZipCountry	Zip	Country	8. This corporation owes the current year	
24 25	29 3	0]	Personal Property Tax. 10. Name and Address of New Registers	Yes No
9. Name and Address of Currer	и надівтагар Адалі	81 Name	IV. Maine and Address of May Negratific	
DIENST, FRANK T		00 0 0 444	(D.O. Day Number in Net Assessable)	!
123 SOUTH PARK AVENU E	39 C	82 Street Address (P.O. Box Number is Not Acceptable)		
TITUSVILLE FL 32780-				
		84 City	AME	85 Zip Code
			F	F1 R3J36
11. Pursuant to the provisions of Sections 607.050 office or registered egent, or both, in the State agent. I am familiar with, and accept the obligations.	2 and 507.1508, Florida Statutes of Florida, Such change was aut	, the above-named corporation	n's board of directors. I hereby accept the app	cintment as registered
	tions of, Section 607.0505, Florid	a Statutes,	21	31195
SIGNATURE Signature, typed of priesd and or objected agent and bills if applicable. (NOTE: Registered Agent applicative required in				
	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition 748
TITLE D	☐ DELETE	1.1 TITLE 1.2 NAME		A
NAME DIENST, FRANK T STREET ADDRESS 422 SOUTH PAPK AVENUE	3940 Pinc	13-31 RET ADDRESS	م	<u> </u>
CITY-ST-ZIP TITUSVILLE FL 32780	1+4 53 111c	Fisher-51-20327	96	
TILE DIENST, MA		21 TITLE 5	cctay Treas	Change ONAddition C
TITLE DIENST, MARILY DELETE 21 TITLE SCORET TREASURY CONSIGNOR CONTROL 22 NAME 22 NAME 22 NAME				
I STREET ADORESS	FL-3-2-796	2.3.STREET ADORESS	SAME.	1
Q111-61-22	DELETE	11 TITLE		Change Addition
NAME .		32 NAME	•	
STREET ADDRESS	<u></u>	3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETÉ	4.1 TITLE		Change Addition
NAME		4.2 NAME		1
STREET ADDRESS		4.3 STREET ADDRESS		ļ
TIY-ST-ZIP DELETE		4.4 CTY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
· · · · · ·		52 NAME		
NAME STREET ADDRESS		5.3 STREET ADDRESS		} '
CITY-ST-ZIP		5.4 CITY-S1-ZIP		
TITLE	☐ DELETE	6.1 TITLE		Change Addition
NAME		8.2 NAME	•	}
STREET ADDRESS		6.3 STREET ADDRESS		.)
I I		6.4 CITY-51-ZIP		· ,

I hereby certify that the information supplied with this filling 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 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 an attachment with an address, with all other like empowered.

SIGNATURE: