## FILED Apr 24, 2006 8:00 am Secretary of State 04-24-2006 90386 017 \*\*\*150.00

ANNUAL REPORT						
DOCUMENT # P9900030387						

1. Entity Name 21ST CEN	TURY PHOTOGRAPHY INC	<b>.</b>				
Principal Place 10655 PALM BOCA RATON	SPRING DRIVE	Mailing Address 10655 PALM SPRING DRIVE BOCA RATON, FL 33428		THE SERVICE HER WITH SERVICE HER SERVICE H	. A 1868 (1891 1891) (1884) (1886 1886)	
2. Principal Pl 979 Suite Apt.	3 Arbor Calsha	3. Mailing Address  NE 970.3	or Oak	12/12/12/14/14/14/14/14/14/14/14/14/14/14/14/14/	E034 (11/05)	
Gip #State	Datan E	City's State	an El	4. FEI Number 65-0929233	Applied For Not Applicable	
3346	28 Ram Beach 6. Name and Address of Current Re	33428 Felin	Beach	5. Certificate of Status Desired     7. Name and Address of New Registere	\$8.75 Additional Fee Required	
10655 PAL	I, ROGER L M SPRING DRIVE TON, FL 33428	9	Name Region	P.O. BoyNumber (Not Accept to a K	s Lane	
			City B	Ca Raton F	L 2000001/25	
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 praistered agent.  SIGNATURE  Spraume, hypoto printed name of registered agent and table if applicable (INOTE: Registered Agent signature required when reinstating)  DATE						
FIL! After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finar     Trust Fund Contribution.	· - +-	.00 May Be ed to Fees		
10.	OFFICERS AND DI	RECTORS 11.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOPALIAN, ROGER L 10655 PALM SPRING DRIVE BOCA RATON, FL 33428		1.4.7	323 Arbor Oak	Shehange Addition And Addition Shahe	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		2	1.0	sca Raton, FZ3.	3428 □ Addition	
NAME STREET ADDRESS CITY-ST-ZIP			- <del>-</del> 1		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<b>I</b>		☐ Change ☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP		1			☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 prospect on the exercise of the corporation or the receiver or prospect on the exercise of the corporation or the receiver or prospect						
SIGNATURE: ONLY OFFICER OR DIRECTOR Date Date Date Date Date Date Date Date						