

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000089177

1. Entity Name

ACKERMANN PHOTO-LAB, INC.

FILED

May 30, 2000 8:00 am
Secretary of State

05-30-2000 90008 044 ***150.00

Principal Place of Business

Mailing Address

5836 ATLANTA ST. 1627 S. UNIVERSITY DR
HOLLYWOOD FL 33021 HOLLYWOOD FL 33021-2718 SAME
Plantation, FL 33324

2. Principal Place of Business

3. Mailing Address

1627 S. UNIVERSITY DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

PLANTATION, FL

4. FEI Number

65-0953115

Applied For

Not Applicable

Zip

Country

Zip

Country

33324 USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZAPATA, MARCO A MOGOLLON, German H.
5836 ATLANTA ST. 3687 N.W. 94 AVE I-4
HOLLYWOOD FL 33021 SUNRISE, FL 33351

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
	PD	ZAPATA, MARCO A	5836 ATLANTA ST. HOLLYWOOD FL 33021	
	VP	MOGOLLON, GERMAN H	5836 ATLANTA ST. 3687 NW 94 AVE-I 4 HOLLYWOOD FL 33021 SUNRISE, FL 33351	<input type="checkbox"/> Delete
	VP	JOSE RAMON ANDUJAR	10160 N.W. 3 ST. Pembroke Pines, FL 33026	<input type="checkbox"/> Delete
	S	ANA M ANDUJAR	10160 N.W. 3 ST Pembroke Pines, FL 33026	<input type="checkbox"/> Delete
		LUZ C DIAZ	3687 NW 94 AVE -I 4 SUNRISE, FL 33351	<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #