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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S23521

1. Corporation Name

PERKINS	S PHOTOGRAPHIC, INC.				
Principal Place	of Business	Mailing Address			BIDIC BEBTI BIDIS ELBTI GLOSS IDBI
704 NORTH MASSACHUSETTS AVENUE 704 NORTH MASSACHUSE LAKELAND FL 33801 LAKELAND FL 33801			ETTS AVENUE	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed	301102
				01/08/1991	
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3043681	\$8.75 Additional
Suite, Apt. #, etc.		Suite, Apt. #, etc.		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
Zip	Country	Zip	Country	This corporation owes the current year Ir Personal Property Tax.	ntangible No
24	9. Name and Address of Curre	29 Agent	[30]	10. Name and Address of New Registered	
	5. Name and Address of Corre	nt Registered Agent	81 Name	To Harris and Harrison or Harrison	
	KINS, JEROME F.		00 00-110	Idaa - (D.O. Day Nyashay is Not Assantable)	
704 NORTH MASSACHUSETTS AVENUE		82 Street Ad	Idress (P.O. Box Number is Not Acceptable)		
LAKELAND FL 33801			83		
			84 City	FI	85 Zip Code
44 D	the previous of Spatians 607.05	02 and 607 1609 Elorida Statut	tos the above-named co	progration submits this statement for the nurnose of	f changing its registered
office or n agent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was a	authorized by the corpora	ation's board of directors. I hereby accept the appo	ointment as registered
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE:			Registered Agent signature requ		
12.		ND DIRECTORS	13	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PVP				Change Addition
	OCOVING ICOOME C	☐ DELETE	1.1 TITLE	P	Change
NAME	PERKINS, JEROME F.	□ OEL£TE	1.2 NAME	P PERKINS, JEROME F	. ,
STREET ADDRESS	704 N. MASSACHUSETTS	☐ DELETE	1.2 NAME 1.3 STREET ADDRESS	P PERKINS, JEROME F 704 N. MASSACHUSET	. ,
STREET ADDRESS CITY-ST-ZIP	704 N. MASSACHUSETTS LAKELAND FL		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	P PERKINS, JEROME F 704 N. MASSACHUSET LAKELAND FL	τ5
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CITY-ST-ZIP 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS