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PROFIT,
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V17283** (5)

1. Corporation Name

~~RICK OLTMANS PHOTOGRAPHY, INC.~~

Oltmans Photo Design Inc



Principal Place of Business

185 SW 20TH WAY
DANIA FL 33004
US

Mailing Address

7760 NW 6TH COURT
PEMBROKE PINES FL 33024
US

2. Principal Place of Business

21 *4911 SW 164 Ter*

2a. Mailing Address

26 *4911 SW 164 Ter*

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

FT Land FL

28 City & State

FT Land FL

24 Zip

33331

Country

Broward

29 Zip

33331

Country

Broward

9. Name and Address of Current Registered Agent

DONATO, RICHART T.
ENGLAND & DONATO
7700 DAVIE ROAD EXTENSION
HOLLYWOOD FL 33024

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed with other information required by the statute

Date (If Registered Agent signature required when not changing)

DATE

12. OFFICERS AND DIRECTORS

12.1	12.2	12.3	12.4
NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
DP OLTMAINS, RICK	7760 NW 6TH COURT	4911 SW 164 Ter FT Land FL 33331	☐
V OLTMAINS, JUDI	7760 NW 6TH COURT	4911 SW 164 Ter FT Land FL 33331	☐
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	13.2	13.3	13.4
NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Rick Oltmans

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone