## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V52388

(8)

FILED Feb 17 1998 8:00am Secretary of State

PHOTO	MARKETING, INC.	(3)			Šte Šišia Ragii Sirji - Razio ara
Principal Plac	ce of Business	Mailing Address		I IDDAN BISADA ALUAN SISADA SINDA SANDA SA	AN BIBIT BIBIT BIBIT BIBIT 1881
1808 S. COLONIAL DR. 420 MELROSE AVE. STE. 2 WINTER PARK FL 32789 ORLANDO FL 32803				DO NOT WRITE IN THI	S SPACE
UKLAMDO FL US	32003			3. Date Incorporated or Qualified	3 di NOE
<b>V</b>				07/20/1992	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3140410	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	0	City & State		Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	
24	25 9. Name and Address of Cur		10	Personal Property Tax due June 30.  10. Name and Address of New Registere	Yes XNo
00		Tent Registered Agent	81 Name	10. Hallie and Address of New Registere	o y Seur
ACC PART DOOR AND					
420 MELROSE AVE. WINTER PARK FL 32789			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
**!	TIEN PAIN PL 32/08		83		
			84 City	F	85 Zip Code
11. Pursuant office or apent. La	to the provisions of Sections 607.0 registered agent, or both, in the St	502 and 607.1508, Florida Statutes ate of Florida, Such change was au ligations of Section 607.0505, Flori	the above-named corporation of the corporation of t	oration submits this statement for the purpose on's board of directors. I hereby accept the a	_
SIGNATURE	,				
	Signature, typed or printed name of registered		Registered Agent signature require		
12. TITLE	PSTD OFFICERS A	AND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12  Change Addition
NAME	SECHBACH, SIM		1.2 NAME		C Change C Addition
STREET ADDRESS	420 MELROSE AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL		1.4 CHY-ST-ZIP		
TITLE	77177 617 77 47 7 2	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STHEET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3 4. CITY - ST - ZIP		
TITLE		☐ DELETÉ	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		,
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELET <b>E</b>	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Dritte	5.4 CITY - ST - ZIP		Change I Addition
TITLE		☐ DELET <b>E</b>	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	and that the information supplies	with this filing does not qualify for	6.4 CiTY - ST - ZIP	Section 119 07/3)(i) Florida Statutes Lituriber	cortifu that the information

14. I hereby certify that the information supplied with this filing does not qualify for the exomption 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.

MONATURE Sum Sent but

2/12/98