


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2008 08:00 AM
Secretary of State

DOCUMENT # F02000000453

1. Entity Name
 AMERICAN BRIGHT SIGNS, INC.



Principal Place of Business
 1440 KENNEDY CAUSEWAY
 STE 302
 MIAMI BEACH, FL 33141

Mailing Address
 1440 KENNEDY CAUSEWAY
 STE 302
 MIAMI BEACH, FL 33141

DO NOT WRITE IN THIS SPACE



07082008 No Chg-P CR2E034 (11/05)

4. FEI Number
 13-4006242

Applied For
 Not Applicable

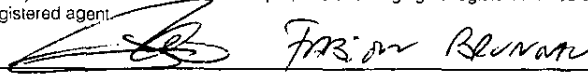
5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BRUNEAU, FABIEN
 1440 KENNEDY CAUSEWAY
 STE 302
 MIAMI BEACH, FL 33141

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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 registered agent.

SIGNATURE  DATE 7/8/08

Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

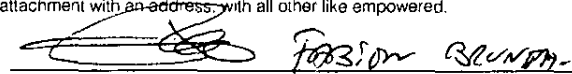
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	SD BRUNEAU, FABIEN 1440 KENNEDY CAUSEWAY #302 MIAMI BEACH, FL 33141
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 07/10/08-80002-013 550.00

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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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE 7/8/08 DAYTIME PHONE # 305 868 7613

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #