


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

**FILED**

**Feb 05 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

**DOCUMENT # J49626 (1)**  
1. Corporation Name  
**AMERICAN OUTDOOR SIGN COMPANY**



Principal Place of Business <del>1/0 JAMES A. CHEROF</del> <del>2477 E. COMMERCIAL BLVD.</del> <del>FT LAUDERDALE FL 33308</del>	Mailing Address <del>1/0 JAMES A. CHEROF</del> <del>2477 E. COMMERCIAL BLVD.</del> <del>FT LAUDERDALE FL 33308</del>
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>12/31/1986</b>	
21 <b>1/0 Gordon W. Latz</b>	26 <b>c/o Gordon W. Latz</b>	4. FEI Number <b>65-0000562</b>		Applied For Not Applicable	
22 <b>2477 E. Commercial Blvd</b>	27 <b>2477 E. Commercial Blvd</b>	5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
23 <b>Fort Lauderdale, FL</b>	28 <b>Fort Lauderdale, FL</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
24 <b>33308</b>	25	29 <b>33308</b>	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
<b>MEHALLIS, STEPHEN G.</b> <b>2477 E. COMMERCIAL BLVD.</b> <b>FT LAUDERDALE FL 33308</b>		81 Name			
		82 Street Address (P.O. Box Number is Not Acceptable)			
		83			
		84 City	<b>FL</b>	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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LATZ, GORDON	1.2 NAME	
STREET ADDRESS	2477 E. COMMERCIAL BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33308	1.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AHERRON, TRACY	2.2 NAME	
STREET ADDRESS	2477 E. COMMERCIAL BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	2.4 CITY-ST-ZIP	
TITLE	ST <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PANESH, BETH	3.2 NAME	
STREET ADDRESS	2477 E.COMMERCIAL BLVD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT.LAUDERDALE FL 33308	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 change is shown on an attachment with an address.

SIGNATURE: *BETH PANESH* **BETH PANESH, REQUESTY./TREAS.** **1/28/98 (954) 491-1722**

CR2E034 (10/97)