

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000011968

**FILED**  
**Jan 09, 2007**  
**Secretary of State**

**Entity Name:** CITY SIGNS OF HALLANDALE INC

**Current Principal Place of Business:**

215 POINCIANA ISLAND DRIVE  
SUNNY ISL BEACH, FL 33160

**New Principal Place of Business:**

215 POINCIANA ISLAND DRIVE  
SUNNY ISL BEACH, FL 33160 US

**Current Mailing Address:**

215 POINCIANA ISLAND DRIVE  
SUNNY ISL BEACH, FL 33160

**New Mailing Address:**

215 POINCIANA ISLAND DRIVE  
SUNNY ISL BEACH, FL 33160 US

**FEI Number:** 20-4140076

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DERHY FINANCIAL SERVICES LLC  
99 N.W. 183RD ST  
112  
MIAMI, FL 33169 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BEN DAVID, GERMAINE Z  
Address: 215 POINCIANA ISLAND DRIVE  
City-St-Zip: SUNNY ISL BEACH, FL 33160

Title: V (X) Delete  
Name: SASSON, ISAAC  
Address: 2501 N.E. 195TH STREET  
City-St-Zip: NORTH MIAMI, FL 33180

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BEN DAVID, GERMAINE Z  
Address: 215 POINCIANA ISLAND DRIVE  
City-St-Zip: SUNNY ISL BEACH, FL 33160 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BEN DAVID GERMAINE

P

01/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date