2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an address, with all other like employed

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _

FILED Mar 07, 2008 08:00 A Secretary of State **DOCUMENT # P06000040038** 1. Entity Name AAA STRIPING PLUS/SOD & SIGNS, INC. Principal Place of Business Mailing Address 3419 21ST ST. CT. EAST 3419 21ST ST. CT. EAST BRADENTON, FL 34208 BRADENTON, FL 34208 02262008 No Cho-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-4322745 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE RUELAS, ADAN 3419 21ST ST. CT. EAST BRADENTON, FL 34208 IN THIS SPACE 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 Signature, typed or ponted name of registered agent and title if applicable (NOTE: Registered Agent aignature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE RUELAS, ADAN STREET ADDRESS 3419 21ST ST. CT. EAST BRADENTON, FL 34108 CITY-ST-ZIP U00000851605 03/25/08-80046-011 158.75 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-Z#P TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 test as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if