


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 04, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P94000010914</b> 1. Entity Name S2 ADVERTISING, INC.	
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Principal Place of Business 221 S. RIDGEWOOD AVE. DAYTONA BEACH, FL 32114	Mailing Address 221 S. RIDGEWOOD AVE. DAYTONA BEACH, FL 32114
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01082007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3227335	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SCALI, CHRISTOPHER  
 221 E RIDGEWOOD AVENUE  
 DAYTONA BEACH, FL 32114

DO NOT WRITE  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

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

U00000689035

04/11/07-80019-020 150.00

10. OFFICERS AND DIRECTORS	
TITLE	P
NAME	SCALI, CHRISTOPHER
STREET ADDRESS	221 S RIDGELAND
CITY-ST-ZIP	DAYTONA BEACH, FL
TITLE	VP
NAME	SCALI, TONI L
STREET ADDRESS	221 S RIDGELAND
CITY-ST-ZIP	DAYTONA BEACH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE  
IN THIS SPACE

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:  3/30/07 386-254-6898

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