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PROFIT CORPORATION
 ANNUAL REPORT
 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **P97000071581**

1. Corporation Name
A-1 SIGN & PRINTING CORP



Principal Place of Business
 1681 N.W. 27TH AVENUE
 MIAMI FL 33125

Mailing Address
 1681 N.W. 27TH AVENUE
 MIAMI FL 33125

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/18/1997

4. FEI Number
65-0771824 Applied For
 Not Applicable

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

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

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business
 21 **888 NW 27 AVE**
 Suite, Apt. #, etc.
 22 **#2**
 City & State
 23 **Miami FL**

2a. Mailing Address
 26 **- SAME**
 Suite, Apt. #, etc.
 27
 City & State
 28
 Zip Country
 24 **33125** 25 **Miami-Dade** 29 30

9. Name and Address of Current Registered Agent
MONROY, JOSE A
1681 NW 27 AVE
MIAMI FL 33125

10. Name and Address of New Registered Agent

81 Name **JOSE A. MONROY**

82 Street Address (P.O. Box Number is Not Acceptable)
888 NW 27 AVE

83

84 City **Miami FL** 85 Zip Code **33125**

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 **X [Signature]** DATE **3/18/99**

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

12. OFFICERS AND DIRECTORS

TITLE DELETE
P
 NAME **MONROY, JOSE A**
 STREET ADDRESS **1681 NW 27 AVE**
 CITY-ST-ZIP **MIAMI FL 33125**

TITLE DELETE

TITLE DELETE

TITLE DELETE

TITLE DELETE

TITLE DELETE

TITLE DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

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)(l), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **X [Signature]** DATE **3/14/99** DAYTIME PHONE # **305-644-1535**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)