


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000071581
 1. Entity Name
 A-1 SIGN & PRINTING CORP



Principal Place of Business 888 NW 27TH AVE SUITE #1 MIAMI, FL 33125 US	Mailing Address 888 NW 27TH AVE SUITE #1 MIAMI, FL 33125 US
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04152006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0771824	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
 MONROY, JOSE A
 888 N.W. 27TH AVENUE
 MIAMI, FL 33125

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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 Jose Monroy DATE 04-15-06
Signature, typed or printed name of registered agent or trustee if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BERMUDEZ, NORMA F 888 NW 27TH AVE., SUITE 1 MIAMI, FL 33125
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MONROY, JOSE A 888 NW 27TH AVE., SUITE 1 MIAMI, FL 33125
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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 reports 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: Jose Monroy DATE 04-15-06 DAYTIME PHONE # 305-649-8404
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR