2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 03, 2008
Secretary of State

DOCUMENT# P04000001663

Entity Name: A.D.S. SIGNS, INC.

Current Principal Place of Business:

1801 N. KEENE RD.
CLEARWATER, FL 33755 US

New Principal Place of Business:

1886 N. HERCULES AVE
UNIT F
CLEARWATER, FL 33765 US

Current Mailing Address:

1497 MAIN ST.
#317
DUNEDIN, FL 34698 US

New Mailing Address:

FEI Number: 55-0855785 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DETRAPANI, NANCY K
1801 N. KEENE RD.
CLEARWATER, FL 33755 US

Name and Address of New Registered Agent:

DETRAPANI, NANCY K
1123 ROBMAR RD
DUNEDIN, FL 34698 US

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: NANCY K. DETRAPANI 04/03/2008
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: DETRAPANI, NANCY K
Address: 1801 N. KEENE RD.
City-St-Zip: CLEARWATER, FL 33755 US

Title: D ( ) Delete
Name: DETRAPANI, JOSEPH G
Address: 1801 N. KEENE RD.
City-St-Zip: CLEARWATER, FL 33755 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: DETRAPANI, NANCY K
Address: 1497 MAIN ST. # 317
City-St-Zip: DUNEDIN, FL 34698 US

Title: D (X) Change ( ) Addition
Name: DETRAPANI, JOSEPH G
Address: 1497 MAIN ST. #317
City-St-Zip: DUNEDIN, FL 34698 US

I hereby certify that the information supplied with this filing does not qualify 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: NANCY K. DETRAPANI PRES 04/03/2008
Electronic Signature of Signing Officer or Director Date