

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 12 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 266052

(0)

1. Corporation Name

AERIAL SIGN CO., INC.

Principal Place of Business

7501 PEMBROKE RD
HOLLYWOOD FL 33023

Mailing Address

7501 PEMBROKE RD
HOLLYWOOD FL 33023

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/11/1963

4. FEI Number

59-0992888

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BUTLER, ARNOLD
7501 PEMBROKE RD
HOLLYWOOD FL 33023

81 Name

JAMES L. BUTLER

82 Street Address (P.O. Box Number is Not Acceptable)

7501 PEMBROKE ROAD

83

84 City

HOLLYWOOD

FL

85 Zip Code

33023

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

Signature of the registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/30/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VP
NAME BUTLER JAMES L.
STREET ADDRESS 9180 SW 55TH COURT
CITY-ST-ZIP COOPER CITY FL

☐ DELETE

1.1 TITLE VP
1.2 NAME BUTLER JAMES L.
1.3 STREET ADDRESS 7501 PEMBROKE ROAD
1.4 CITY-ST-ZIP HOLLYWOOD, FL 33023

☒ Change ☐ Addition

TITLE ST
NAME BUTLER, JAMES L.
STREET ADDRESS 9180 SW 55TH COURT
CITY-ST-ZIP COOPER CITY FL

☐ DELETE

2.1 TITLE ST
2.2 NAME BUTLER JAMES L.
2.3 STREET ADDRESS 7501 PEMBROKE ROAD
2.4 CITY-ST-ZIP HOLLYWOOD, FL 33023

☒ Change ☐ Addition

TITLE D
NAME BUTLER JAMES L.
STREET ADDRESS 9180 SW 55TH COURT
CITY-ST-ZIP COOPER CITY FL

☐ DELETE

3.1 TITLE D
3.2 NAME BUTLER JAMES L.
3.3 STREET ADDRESS 7501 PEMBROKE ROAD
3.4 CITY-ST-ZIP HOLLYWOOD, FL 33023

☒ Change ☐ Addition

TITLE P
NAME BUTLER, JAMES L.
STREET ADDRESS 9180 SW 55TH COURT
CITY-ST-ZIP COOPER CITY FL

☐ DELETE

4.1 TITLE P
4.2 NAME BUTLER JAMES L.
4.3 STREET ADDRESS 7501 PEMBROKE ROAD
4.4 CITY-ST-ZIP HOLLYWOOD, FL 33023

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:

4/30/98

954-989-2086

CR2E034 (10/97)