2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # 399930

1. Entity Name AD A SIGN, INC.

Principal Place of Business

Mailing Address

32 SANDPIPER RD TAMPA, FL 33609 32 ŠANDPIPER RD. TAMPA, FL 33609

FILED Jul 08, 2004 08:00 AM Secretary of State



07022004

RAYMONDA

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-1458132 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

SCHIFINO, WILLIAM J FIRST FINANCIAL TOWER **SUITE 2711**

DO NOT WRITE IN THIS SPACE

IAMIFA, FL					
	named entity submits this statement for the lons of registered agent.	purpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE					DATE
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		Election Campaign Finan Trust Fund Contribution.	cing _	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DIR	ECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CLARK, RAYMOND A 32 SANDPIPER RD TAMPA, FL 00000,				U00000164363 07/08/04-80005- <u>0</u> 23 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CLARK, SHEILA M 32 SANDPIPER RD TAMPA, FL 00000,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AST CLARK, RAYMOND A 32 SANDPIPER RD TAMPA, FL 00000,			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				iN	THIS SPACE
ITILE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this regort 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.					