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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 515511

(4)

	010110			_
SIGNATURE	SIGNS,	INC.		

FILED Apr 28 1998 8:00am Secretary of State

SIGNATURE SIGNS, INC.							
Principal Plac	e of Business	Mailing Addr	ess				
1450 10TH STREET, SOUTH 1450 10TH STREET, SOUTH							
SAFETY HARBOR FL 34695 SAFETY HARBOR FL 34695				DO NOT WRITE IN THIS	S SPACE		
						3. Date Incorporated or Qualified	
A 60-7-15						09/30/1976	
	lace of Business		2a. Mailing Address			4. FEI Number 59-1691624	Applied For
Suite, Apt. #, 9tc			Suite, Apt #, etc.			Not Applicable \$8.75 Additional	
22		27	27		5. Certificate of Status Desired	Fee Required	
City & State		City & Sta	City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Zin	Country	28		Spunter		Trust Fund Contribution	Added to Fees
Zip 24	25	Zıp 29	30	Country		 This corporation owes or has paid the corporation owes or has paid the corporation. Personal Property Tax due June 30. 	urrent year Intangible Yes No
<u></u>	9. Name and Address of			1		10. Name and Address of New Registered	
DIN	IKEL, MARK			81	Name		
145	60 10TH ST. SOUTH			82	Street Addr	ess (P.O. Box Number is Not Acceptable)	
SAI	FETY HARBOR FL 33572			00			
				83			
				64	City	FI	85 Zip Code
11. Pursuant	to the provisions of Sections (607.0502 and 607.1508, FI	orida Statutes, the	above	e-named corp	poration submits this statement for the purpose	of changing its registered
office or r agent. I a	egistered agent, or both, in the military of the militar with, and accept the militar with, and accept the military of the mil	ne State of Florida. Such ch ne obligations of, Section 6	iange was author 07.0505, Florida S	ized by Statutes	the corporati s.	ion's board of directors. I hereby accept the ap	ppointment as registered
SIGNATURE							
12.	Signature, lyped or printed name of regi	Stered agent and little if applicable RS AND DIRECTORS		tered Age	nt signature require	ed when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIDECTORS IN 13
TITLE	p			1 TITLE	····	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	DINKEL,MARK		1.	2 NAME			_ , _
STREET ADDRESS	4464 4571 67 60171		3 STAEET	ADDRESS			
CITY-ST-ZIP	<u>SAFETY HARBOR FL</u>	AFETY HARBOR FL 1		4 CITY-S	T-ZIP		
TITLE	8		DELETE 2.	2.1 TITLE			Change Addition
NAME	TAPP, TERESA		i i	2.2 NAME		•	
STREET ADDRESS	1450 10TH ST. S. SAFETY HARBOR FL			2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	VPT			4 CITY - S 1 TITLE	SI-ZIP		Change Addition
NAME	BOWERS, TOM	D		2 NAME			
STREET ADDRESS	1450 10TH ST. S.				ADDRESS		
CITY-ST-ZIP	\$AFETY HARBOR FL		3.	4. CITY-S	it - ZIP		
TITLE			DELETE 4.	1 TITLE		•	☐ Change ☐ Addition
NAME				2 NAME			
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP TITLE		П		4 CITY-SI 1 TITLE	T-ZIP		Change Addition
NAME		, ,		2 NAME			
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP				4 CITY-SI			
TITLE				1 TITLE		·	Change Addition
NAME			6.:	2 NAME			
STREET ADDRESS	_		6.	3 STREET	ADDRESS		
CITY-ST-ZIP	author the internal	which with this divine the		4 CITY - ST		Seeken 440 07/0V/\ Firster Otekan Louise	anife, that the information
14. I nereby o	erniy that the information sup	bura witu turs tiling does 🌡	υη qua jiry for the i	exempt	iion stated in :	Section 119.07(3)(i), Florida Statutes. I further of	betwy that the information

Indicated on this annual report or supplemental annual report is frue 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 bystee 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, if on an attachment with an address.