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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **H09073**

GIA DES	SIGN GROUP, INC.				
Principal Place	e of Business	Mailing Address			
2277 LEE RD. SUITE 250 WINTER PARK	FI 32789	2277 LEE RD. SUITE 250 WINTER PARK FL 32789			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 06/22/1984
Principal Place of Business The state of Business The state of Business		2a. Mailing Address 26			4. FEI Number 59-2441181 Applied For NOT APPLICABLE. Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired
City & State		City & State	City & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip	Country	Zip 36	Coun	try	8. This corporation owes the current year Intangible Personal Property Tax. No No
24	9. Name and Address of Currer		<u> </u>		10. Name and Address of New Registered Agent
	5			31 Name	
	, victor p ' Lee Rd.		-	32 Street Add	dress (P.O. Box Number is Not Acceptable)
SUITE 250			-	33	
WINTER PARK FL 32789]	93	
			- 1	34 City	FL 85 Zip Code
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was auth	orized.	by the corborat	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: Ro	egistered A	gent signature requir	red when reinstating) DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TIπ	E	☐ Change ☐ Addition
NAME	TAN, VICTOR		1.2 NAM	IE	
STREET ADDRESS	COTT LET DE CUITE OFC		1.3 STF	EET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32789		1.4 CIT	/-ST-ZIP	
TITLE	V	☐ DELETE	2.1 TIπ	E	☐ Change ☐ Addition
NAME	GAUS, TIMOTHY		2.2 NA	KE	
STREET ADDRESS	200 2211 222 1121 2211		2.3 STF	EET ADDRESS	
CITY-ST-ZIP			2.4 CIT	Y-ST-ZIP	
TITLE		☐ DELETE	3.1 TITI	E	☐ Change ☐ Addition
NAME	321		3.2 NA	KE (
STREET ADDRESS	REET ADDRESS		3.3 STREET ADDRESS		
CITY- ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITI	E	☐ Change ☐ Addition
NAME			4. 2 NA	ļ	
STREET ADDRESS			4.3 STF	EET ADDRESS	
CITY OT ZID			A A CIT	/. CT. 7ID	

CITY-ST-ZIP 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, with all other like empowered.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

□ DELETE

☐ DELETE

Change

☐ Change

Addition

☐ Addition

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90010 035 ***150.00