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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **H44334** (1)
1. Corporation Name
ADMARK SIGNS AND GRAPHICS, INCORPORATED

Principal Place of Business 1928 BRENGLE AVENUE ORLANDO FL 32808	Mailing Address 1928 BRENGLE AVENUE ORLANDO FL 32808
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/25/1985		3a. Date of Last Report 04/14/1994	
4. FEI Number 59-2499503		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	
7. This corporation has liability for intangible tax under S. 190.032, Florida Statutes ☒ Yes ☐ No			
2. Principal Place of Business 21. 316 A GOODLAND ST. Suite, Apt. #, etc. 22. City & State ORLANDO, FL. Zip 32811	2a. Mailing Address 26. 316 A GOODLAND ST. Suite, Apt. #, etc. 27. City & State ORLANDO, FL. Zip 32811		

9. Name and Address of Current Registered Agent COONEY, RICHARD PATRICK 2180 TURKEY RUN WINTER PARK FL 32789		10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City FL 85. Zip Code	
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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 _____
Printed name of registered agent and the corporation: _____
Printed name of registered agent and the corporation: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	SD COONEY, RICHARD PATRICK 2180 TURKEY RUN WINTER PARK FL	1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	PD HUFFMAN, PATRICIA ANN 766 ASHLEY LANE ORLANDO FL	21. TITLE 22. NAME 23. STREET ADDRESS 24. CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	VD HUFFMAN, WILLIAM JOSEPH 766 ASHLEY LANE ORLANDO FL	31. TITLE 32. NAME 33. STREET ADDRESS 34. CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	VD HUFFMAN, MICHAEL THOMAS 1239 MT. VERNON ST. ORLANDO FL	41. TITLE 42. NAME 43. STREET ADDRESS 44. CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	TD COONEY, PATRICIA GAIL 2180 TURKEY RUN WINTER PARK FL	51. TITLE 52. NAME 53. STREET ADDRESS 54. CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	VD HUFFMAN, WILLIAM CRONE 766 ASHLEY LN ORLANDO FL	61. TITLE 62. NAME 63. STREET ADDRESS 64. CITY, ST, ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.030(3)(b), 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 in an attachment with an address.

SIGNATURE: Patricia Ann Huffman April 11, 1995 6407291-8947
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
PATRICIA ANN HUFFMAN PRES/D