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PROFIT CORPORATION ANNUAL REPORT

1998

DOCUMENT #



H85097

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

PHIL ROWE SIGNS, INC.

FILED Feb 09 1998 8:00am Secretary of State



Principal Place of Business Mailing Address % STEPHEN ROWE % STEPHEN ROWE 805 N DIXIE HWY 805 N DIXIE HWY DO NOT WRITE IN THIS SPACE WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 3. Date Incorporated or Qualified 11/12/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2600736 21 26 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees **Trust Fund Contribution** 23 28 Country Zıp 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROWE, STEPHEN 805 N DIXIE HWY 82 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33401 83 84 City Zip Code 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, typed or printed hance of regestered agent and two if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change DELETE 1.1 TITLE Addition TITLE **ROWE, STEPHEN** 1.2 NAME 129 WORTH CT NORTH 1.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 21 TITLE TITLE **ROWE, ALLAYNE** 22 NAME NAME 129 WORTH CT NORTH 23 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP 2 4 CITY-ST-ZIP Addition DELETE ☐ Change 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME 4.3 STREET ADORESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Channe Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

14. I hereby cortify 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 suppliemental 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.

Stocken P.