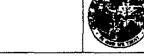
2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # H85097 1. Entity Name PHIL ROWE SIGNS, INC. Principal Place of Business



FILED Jan 09, 2006 08:00 AM **Secretary of State**



% STEPHEN ROWE 805 N DIXIE HWY

WEST PALM BEACH, FL 33401

WEST PALM BEACH, FL 33401

Mailing Address % STEPHEN ROWE 805 N DIXIE HWY

WEST PALM BEACH, FL 33401



DO NOT WRITE IN THIS SPACE

01032000	NO ONGT	CREEOST (11105)		
. FEI Number			Applied For	
59-2600	736	Γ	Not Applicable	

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CB2E024 (44/0E)

6. Name and Address of Current Registered Agent ROWE, STEPHEN 805 N DIXIE HWY

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pations of registered agent.	urpose of changing its register	ed office or	registered agent, or bo	oth, in the State of Florida 1 am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title 8	applicable (NOTE Register	ed Agent signatur	e required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing S5.00 May Be Trust Fund Contribution.		\$5.00 May Be	
10.	OFFICERS AND DIREC	TORS	T		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROWE, STEPHEN 129 WORTH CT NORTH WEST PALM BEACH, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROWE, ALLAYNE 129 WORTH CT NORTH WEST PALM BEACH, FL				000003378957 01/10/06-80003-004 153.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
RITLE NAME STREET ADDRESS GITY-SI-ZIP					
TITLE NAME					

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered