


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # J68995

1. Entity Name
SIGN*A*RAMA INC.



Principal Place of Business Mailing Address

1801 AUSTRALIAN AVE SOUTH 1801 AUSTRALIAN AVE SOUTH
 WEST PALM BEACH, FL 33409 WEST PALM BEACH, FL 33409



03312004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
58-1737365 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK INC.
 11380 PROSPERITY FARMS ROAD, #221E
 PALM BEACH GARDENS, FL 33410

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

04/29/04-80055-017 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	TITUS, ROY W.
STREET ADDRESS	1640 NEW HIGHWAY
CITY-ST-ZIP	FARMINGDALE, NY
TITLE	STD
NAME	SWANSON, STANLEY R.
STREET ADDRESS	1640 NEW HIGHWAY
CITY-ST-ZIP	FARMINGDALE, NY 11735
TITLE	PD
NAME	TITUS, RAYMOND W
STREET ADDRESS	1801 AUSTRALIAN AVE S
CITY-ST-ZIP	WEST PALM BEACH, FL 33409
TITLE	D
NAME	TITUS, ROBERT
STREET ADDRESS	1640 NEW HWY
CITY-ST-ZIP	FARMINGDALE, NY 11735
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 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.

SIGNATURE: *Ray Titus*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____