


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

FILED

Jan 15 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # K19653 (0)			
1. Corporation Name A.S.A.P. SIGN CENTERS, INC.			
Principal Place of Business 2001 SOUTH ORANGE AVENUE ORLANDO FL 32806-3035		Mailing Address 2001 SOUTH ORANGE AVENUE ORLANDO FL 32806-3035	
2. Principal Place of Business 21 2400 Silver Star Rd. Suite, Apt. #, etc. 22 Orlando FL City & State 23 Zip 32804 Country Orange		2a. Mailing Address 26 2400 Silver Star Rd. Suite, Apt. #, etc. 27 Orlando FL City & State 28 Zip 32804 Country Orange	
g. Name and Address of Current Registered Agent HERNANDO, GEORGE & LEA F. 780 PINETREE RD. WINTER PARK FL 32789		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 2630 UNIVERSITY ACRES DR. 83 Orlando 84 City FL 85 Zip Code 32817	
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 name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERNANDO, GEORGE 780 PINE TREE RD. WINTER PARK FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	Change Addition 2630 UNIVERSITY ACRES DR. ORLANDO FL 32817
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERNANDO, LEA F. 780 PINE TREE RD. WINTER PARK FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	Change Addition 2630 UNIVERSITY ACRES DR. ORLANDO FL 32817
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	Change Addition

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, 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.

SIGNATURE:

George Hernandez  
1/8/98 407 421-7222

CR2E034 (10/97)