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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

K28765

(1)

FILED Apr 30 1998 8:00am Secretary of State

SIGN	DOCTOR, INC.			
Principal Place	e of Business	Mailing Address		
P O BOX 2051		P O BOX 2051		
POMPANO BEACH FL 33061		POMPANO BEACH FL 33061		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				07/19/1988
2. Principal Pl.	ace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		65-0096446 Not Applicable
Suite, Apt i	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
Crity & State		City & State		
23	•	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
7 ₁ p	Country	Zip	Country	Inis corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
	g. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered Agent
	astase, roger		81 Nan	ame
	270 NORTHWEST 19TH AVENUE	E	82 Stre	reet Address (P.O. Box Number is Not Acceptable)
	UITE 7			
PC	OMPANO BEACH FL 33064		83	
			84 City	ity FL 85 Zip Code
44 Pursuant t	k, the name one of Sections 607.096	12 and 607 1508 Florida Stat	utos the shovenam	imed corporation submits this statement for the purpose of changing its registered
office or re	egistered agent, or both, in the State	of Honda. Such change wa	s authorized by the c	e corporation's board of directors. I hereby accept the appointment as registered
	n familiar with, and accept the oblig	ations of, Section 607.0505,	Florida Statutes.	
SIGNATURE		es and the Papple able (N	OTE Begistered Agent signa	prature tequifed where relistating) DATE
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PŠT	DETE TE	1.1 TITLE	Change Addition
NAME	NASTASE, ROGER		1.2 NAME	
STREET ADDRESS	4270 NW 19TH AVENUE		1.3 STREET ADDRES	RISS
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY-ST-ZIP	
TITLE	D NACTACE BOOKE	DELETE	2 1 TITLE	Change Addition
NAME	Nastase, Roger 4270 NW 19TH Avenue		2 2 NAME	
STREET ADDRESS	POMPANO BEACH FL		2 3 STREET ADDRES	
CITY-ST-ZIP TITLE	FOMPANU BEACH FL	DELETE	2 4 CITY - \$1 - ZIP 3 1 TITLE	P Change Addition
NAME		_ o	3 2 NAME	book courge past rountum
STREET ADDRESS			3.3 STREET ADDRES	223
CITY - ST - ZIP			3 4. CITY - ST- ZIP	
TITLE			41 TITLE	Change Addition
NAME		DELETE		Onange monitor
		□ 1 DETETE	4 2 NAME	La Grange La rochton
STREET ADDRESS		["] DETER		
			4-2 NAMI 4-3 STREET ADDRES 4-4 CITY - ST - ZIP	RESS .
STREET ADDACSS		☐ DELETE	4 2 NAMI 4 3 STREET ADDRES 4.4 CITY - ST - ZIP 5.1 TITLE	RESS.
STREET ADDRESS CITY-ST-ZIP TITLE NAME			4 2 NAME 4 3 STREET ADDRES 4.4 CITY - ST - ZIP 5.1 TITLE 5 2 NAME	RESS Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			4 2 NAMI 4 3 STREET ADDRES 4.4 CITY - ST - ZIP 5.1 TITLE 5 2 NAME 5.3 STREET ADDRES	Change Addition
STREET ACCORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELITIE	4 2 NAME 4 3 STREET ADDRES 4.4 CITY - ST - ZIP 5.1 TITLE 5 2 NAME 5 3 STREET ADDRES 5 4 CITY - ST - ZIP	RESS Change
STREET ACORESS CITY-ST-ZIP THEE MAME STREET ADDRESS CITY-ST-ZIP THEE			4 2 NAME 4 3 STREET ADDRES 4.4 CITY - ST - ZIP 5.1 TITLE 5 2 NAME 5 3 STREET ADDRES 5.4 CITY - ST - ZIP 6 + TITLE	Change Addition
STREET ACORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		DELITIE	4 2 NAME 4 3 STREET ADDRES 4.4 CITY - ST - ZIP 5.1 TITLE 5 2 NAME 5 3 STREET ADDRES 5.4 CITY - ST - ZIP 6 1 TITLE 6 2 NAME	Change Addition Change Addition Change Addition
STREET ACORESS CITY-ST-ZIP THEE MAME STREET ADDRESS CITY-ST-ZIP THEE		DELITIE	4 2 NAME 4 3 STREET ADDRES 4.4 CITY - ST - ZIP 5.1 TITLE 5 2 NAME 5 3 STREET ADDRES 5.4 CITY - ST - ZIP 6 + TITLE	Change Addition Change Addition Change Addition

e and that my signature shall have the same legal effect as it made under oath; that I am all ule this report as required by Chapter 607, Florida Statutes, and that my name appears in

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