2008 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 04, 2008 8:00 am **Secretary of State**

03-04-2008 90015 046 ***150.00 DOCUMENT # K50535 1. Entity Name SPRING SIGN SUPPLY, INC. Principal Place of Business Mailing Address 3921 NW 114TH AVE PO BOX 770395 CORAL SPRINGS, FL 33077-0395 US POMPANO BEACH, FL 33065 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02202008 CR2E034 (12/06) Chg-P City & State City & State Applied For 4. FEI Number 65-0094827 Not Applicable Zip Zip \$8.75 Additional Country Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROSENTHAL Street Address (P.O. Box Number is Not Acceptable) 3921 NW 114TH AVE POMPANO BEACH, FL 33065 Zip Code City FL 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 lamiliar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) - -- DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Addition Delete ☐ Change 10148 mi e ROSENTHAL, ALFRED M. NAME NAME STREET ADDRESS 3921 NW 114TH AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH, FL 33065 Delete THLE ☐ Addition TITLE WHATLEY, JEFFREY NAME MARA 3921 NW 114TH AVE STREET ADDRESS STREET ADDRESS POMPANO BEACH, FL 33065 CITY-S1-ZIP CITY-ST-ZIP Addition TITLE TITLE Change WHATTEY, JEFFREY WHATLEY, DIANE NAME NAME 3921 N.W. 114 AVE. STREET ADDRESS 3921 NW 114TH AVE STREET ADDRESS pompan BEACH FL - 33065 POMPANO BEACH, FL 33065 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST ZIP CITY-SI-ZIP ☐ Addition Channa Channa TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-S1-71P Delete HILE ☐ Change Addition TIFLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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

× 25 Feb 2008