## 2008 FOR PROFIT CORPORATION

## FILED ANNUAL REPORT Jan 09, 2008 08:00 A Secretary of State DOCUMENT #K98840 1. Entity Name SIGNS IN A FLASH, INC. Principal Place of Business Mailing Address 1666 SE 10TH AVENUE 1666 SE 10TH AVENUE FT. LAUDERDALE, FL 33316 FT. LAUDERDALE, FL 33316 No Chg-P 01042008 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0128175 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent NOBEL, PAMELA DO NOT WRITE 1666 SE 10TH AVENUE FT. LAUDERDALE, FL 33316 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. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. U00000777313 01/10/08-80002-023 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE LAZZARINO, ROCCO NAME STREET ADDRESS 1666 SE 10TH AVENUE FT. LAUDERDALE, FL CITY-ST-ZIP TITLE NAME NOBEL, PAMELA 1666 SE 10TH AVENUE STREET ADDRESS FT. LAUDERDALE, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-7IP

12. I hereby 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 at 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 fustee expowered 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 wit

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP