


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000018384 1. Entity Name ATLAS SIGNS LIGHTING & MAINTENANCE LLC	
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DIVISION OF CORPORATIONS

08 APR 24 AM 9:40

Principal Place of Business 1077 W. BLUE HERON BLVD. RIVIERA BEACH, FL 33404	Mailing Address 1077 W. BLUE HERON BLVD. RIVIERA BEACH, FL 33404
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DO NOT WRITE IN THIS SPACE



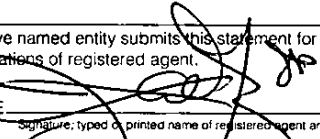
02262008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5217344	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent COHN, BENNETT S 1806 OLD OKEECHOBEE ROAD WEST PALM BEACH, FL 33409
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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  (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$438.75
After May 1, 2008 Fee will be \$538.75**

**500128787455
05/08/08--01006--003 **566.25**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ADINOLFE, JAY 1077 W. BLUE HERON BLVD. RIVIERA BEACH, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ADINOLFE, JAMES 1077 W. BLUE HERON BLVD. RIVIERA BEACH, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ADINOLFE, JEFFERY 1077 W. BLUE HERON BLVD. RIVIERA BEACH, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ADINOLFE, JOSEPH 1077 W. BLUE HERON BLVD. RIVIERA BEACH, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.
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SIGNATURE: 	3/7/08 561-263-4653
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date Daytime Phone #