

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L65839

Entity Name: SPECIALTY SIGNS, INC.

FILED  
Apr 25, 2004  
Secretary of State

## Current Principal Place of Business:

% ROBIN INTOPPA  
6614 PATRICIA DRIVE  
WEST PALM BEACH, FL 33413

## New Principal Place of Business:

## Current Mailing Address:

% ROBIN INTOPPA  
6614 PATRICIA DRIVE  
WEST PALM BEACH, FL 33413

## New Mailing Address:

FEI Number: 65-0195417

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

INTOPPA, ROBIN  
6614 PATRICIA DRIVE  
WEST PALM BEACH, FL 33413 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: INTOPA, ROBIN,  
Address: 6614 PATRICIA DR  
City-St-Zip: WEST PALM BEACH, FL

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SEC ( ) Change (X) Addition  
Name: INTOPPA, EDWARD B SECRETA  
Address: 6614 PATRICIA DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33413 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBIN INTOPPA

DP

04/25/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date