PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Kathorine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # M98005

	CTURAL SIGNAGE SYSTE								
Principal Place	of Business	Mailing Address							
C/O LINDA D. KETCHUM 113 FIRST AVE SW LUTZ FL 33549 C/O LINDA D. KETCHUM 113 FIRST AVE SW LUTZ FL 33549					DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed				1
บร		US			· · · · · · · · · · · · · · · · · · ·				[
		La Visita Addana			09/09/1988 4. FEI Number		I Ac	plied For	
	ace of Business	2a. Mailing Address			59-2911319			t Applicable	}
21		Suite, Apt. #, etc.						Additional	ì
Suite, Apt. i	, etc.	27			5. Certificate of Status Desired		Fee Re	equired	
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be	}
23	•	28			Trust Fund Contribution		Added	to Fees	Į
Zip =	Country	2 p	Cou	ntry .	# 8,≈This corporation owes the cur	ent year.Inta	ngible	مستضمون جاريتهم	
24	25	29	30		Personal Property Tax.		X7 Xes	□нь	}
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New	Registered A	gent		1
				81 Name	Aul E. Kete	hum			İ
	CHUM, LINDA D.			82 Street Add	ress (P.O. Box Number is Not Accept	eble) 50	.))
	3 5TH ST SW				823 3/2 3/				}
נטוצ	FL 33549			83	-				J
				84 City	+2	Fi	85 Zip	Code 35 4 9	}
					the sub-lie this statement for the	FL.	handing its	registered	ĺ
11. Pursuant 1	o the provisions of Sections 607.050	02 and 607,1508, Florida Statut of Florida, Such change was a	tes, the al authorized	pove-named corp by the corporati	poration submits this statement for the on's board of directors. I hereby access	pt the appoin	tment as re	gistered	
agent. 1 au	n familiar with, and accept the other	ations of Section 607.0505, Fic	orida Stati	utes.	3/	79/9	6]
SIGNATURE	May a Ka	our-		Agent signature requir		27/7	<u> </u>		۱_
}		ent and title if applicable (NOTE ND DIRECTORS	13.	Agent agrana inches	ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTO	ORS IN 12	8
12.	VST	DELETE	1.1 10	r.E					7 ***
NAME	KETCHUM, LINDA D.						Change	Addition	15
STREET ADDRESS	18823 FIFTH STREET SW		1.2 N	ME !			☐ Change	Addition	8
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	1107 FI		1.357	REET ADDRESS	٠.		☐ Change		RZE034 (1
CITY-ST-ZIP	LUTZ FL	☐ DELETE	1.357	REET ADORESS TY-ST-ZIP			☐ Change	Addition	CR2E034 (11/98)
TITLE	P	C) DÉLETE	1.3 ST	REET ADURESS IY-ST-ZIP					CR2E034 (1
TITLE NAME	P KETCHUM, PAUL E.	☐ DÉLETE	1.3 ST 1.4 CF 2.1 TH 2.2 NM	REET ADURESS IY-ST-ZIP	· .				CR2E034 (1
TITLE NAME STREET ADDRESS	P KETCHUM, PAUL E. 18823 FIFTH STREET SW	☐ DELETE	135T 14 CF 2.1 TH 2.2 NM 2.3 ST	REET ADDRESS IY-ST-ZIP ILE	· .		_ Change	☐] Addition	CR2E034 (1
TITLE NAME	P KETCHUM, PAUL E.	☐ DELETE	135T 14 CF 2.1 TH 2.2 NM 2.3 ST	REET ADDRESS ITY-ST-ZIP ILE ME REET ADDRESS ITY-ST-ZIP					CR2E034 (1
TITLE NAME STREET ADDRESS CITY-SI-ZIP	P KETCHUM, PAUL E. 18823 FIFTH STREET SW		1.3 ST 1.4 CF 2.1 TF 2.2 NA 2.3 ST 2.4 C	REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE			_ Change	☐] Addition	CR2E034 (1
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CITY-S1-ZIP 14. I hereby certify that the information supplied with this fling does not qualify for the exemption stated in Section 119.07(3(i)). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 507. Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90243 022 ***150.00