

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P01000040140

**Entity Name:** SIGNAGE & PRECISION CUTTING, CO.**FILED**  
**Nov 26, 2007**  
**Secretary of State****Current Principal Place of Business:**15980 NW 48 AVE  
MIAMI, FL 33014**New Principal Place of Business:****Current Mailing Address:**15552 RAVENSWICKE MANOR  
DAVIE, FL 33331**New Mailing Address:**

FEI Number: 65-1094940      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**GONZALEZ, MAURICIO A  
15552 RAVENSWICKE MANOR  
DAVIE, FL 33331 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

**OFFICERS AND DIRECTORS:**Title: VP ( ) Delete  
Name: GONZALEZ, GERMAN  
Address: 15980 NW 48 AVE  
City-St-Zip: MIAMI, FL 33014Title: D (X) Delete  
Name: GONZALEZ, GLORIA  
Address: 15980 NW 48 AVE  
City-St-Zip: MIAMI, FL 33014Title: D (X) Delete  
Name: GONZALEZ, LESLY  
Address: 15552 RAVENSWICKE MANOR  
City-St-Zip: DAVIE, FL 33331Title: P (X) Delete  
Name: GONZALEZ, MAURICIO A  
Address: 15552 RAVENSWICKE MANOR  
City-St-Zip: DAVIE, FL 33331**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change ( ) Addition  
Name: GONZALEZ, MAURICIO A  
Address: 15552 RAVENSWICKE MANOR  
City-St-Zip: DAVIE, FL 33331Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MAURICIO A. GONZALEZ

P

11/26/2007

Electronic Signature of Signing Officer or Director

Date