

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90743 045 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000058420

1. Entity Name
INDESTRUCTIBLE SIGNS, INC.



90123155

Principal Place of Business
 901 E CAMINO REAL
 BOCA RATON, FL 33432

Mailing Address
 901 E CAMINO REAL
 BOCA RATON, FL 33432

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-1123101

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$3.75 Additional Fee Required

6. Name and Address of Current Registered Agent

M & W AGENTS, INC.
 2101 CORPORATE BLVD SUITE 107
 BOCA RATON, FL 33431

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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: _____

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

10. OFFICERS AND DIRECTORS

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

NELSON, KENNETH W
 901 E CAMINO REAL
 BOCA RATON, FL 33432

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

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NAME

STREET ADDRESS

CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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NAME

STREET ADDRESS

CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 190.07(3)(c), Florida Statutes. I further certify that the information indicated on this report or supplemental report is 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 trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with an otherlike empowered.

SIGNATURE: Kenneth W. Nelson 4/25/03

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR