2005 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT **FILED** Jan 21, 2005 08:00 AM DOCUMENT # P01000111874 1. Entity Name **Secretary of State** SOUTHERNMOST SIGN SERVICE, INC. Principal Place of Business Mailing Address 913 EATON ST 913 EATON ST KEY WEST, FL 33040 KEY WEST, FL 33040 01182005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1153419 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RICHARD H. HARRIS & ASSOCIATES, P.A. DO NOT WRITE 4901 NW 17TH WAY, STE 406 FT LAUDERDALE, FL 33843 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) U00000188571 FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing **\$5.00** May Be 01/24/05-80065-006 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE REID, CARL NAME STREET ADDRESS 30661 LYTTONS WAY CITY-ST-ZIP BIG PINE KEY, FL 33043 TITLE RANDALL, MARGARET NAME STREET ADDRESS 2911 STAPLES AVE CITY-ST-ZIP KEY WEST, FL 33040 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP πTLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CICNIATURE.*

CICNIATURE.