2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000040093

Entity Name: EXPAND A SIGN USA INC.

FILED Jul 07, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1934 SE CAMDEN ST. 413 N E BAKER ST PORT SAINT LUCIE, FL 34952 STUART, FL 34994

Current Mailing Address: New Mailing Address:

413 N E BAKER ST 1934 SE CAMDEN ST. PORT SAINT LUCIE, FL 34952 STUART, FL 34994

FEI Number: 04-3641665 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

HAYDEN, STEPHEN M HARDIE, RENEE 275 NE 48 ST 901 MARTIN DOWNS BLVD. POMPANO BEACH, FL 33064 US 200A PALM CITY, FL 34990 US

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: RENEE HARDIE

07/07/2004 Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

GRICE, JUDITH GRICE, JUDITH Name: Name: 11263 W. ATLANTIC BLVD. #C103 1934 S E CAMDEN ST Address: Address: City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: PORT ST LUCIE, FL 34952

Title: Title: () Change () Addition () Delete

GRICE, RICHARD P Name: Name: 1934 SE CAMDEN ST. Address: Address: PORT SAINT LUCIE, FL 34952 City-St-Zip: City-St-Zip:

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: JUDITH GRICE **PST** 07/07/2004