

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2007 08:00 A
Secretary of State

DOCUMENT # P03000074100

1. Entity Name
CITY SIGNS OF BOCA, INC.



Principal Place of Business
10018 SPANISH ISLE BLVD.
SUITE A11 & 12
BOCA RATON, FL 33498

Mailing Address
10018 SPANISH ISLE BLVD.
SUITE A11 & 12
BOCA RATON, FL 33498



05142007 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0077143

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHARNECO, NICHOLAS J PRES
10018 SPANISH ISLE BLVD.
SUITE A12
BOCA RATON, FL 33498

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.

(NOTE: Registered Agent signature required when re-registering)

000000764696
05/31/07 08:00 010 150.00
DATE

FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES CHARNECO, NICHOLAS 10018 SPANISH ISLES BLVD STE A-12 BOCA RATON, FL 33498
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changes, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/07

Daytime Phone #