

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 25, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # P03000079610

1. Entity Name

OUT-HOUSE ADVERTISING, INC.



Principal Place of Business

1604 SW 9TH STREET

1  
FORT LAUDERDALE, FL 33312

Mailing Address

1604 SW 9TH STREET

1  
FORT LAUDERDALE, FL 33312



01222007

No Chg-P

CR2E034 (11/05)

4. FEI Number

57-1179020

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

CORSON, DEBBIE

1604 SW 9TH ST.

FORT LAUDERDALE, FL 33312

**DO NOT WRITE  
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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.



**\$5.00** May Be  
Added to Fees

U000000603470  
01/29/07-80014-021 158.75

**10. OFFICERS AND DIRECTORS**

TITLE P  
NAME LINDERMAN, CLARIBEL  
STREET ADDRESS 1604 SW 9TH STREET  
CITY-ST-ZIP FORT LAUDERDALE, FL 33312

TITLE T  
NAME CORSON, DEBBIE  
STREET ADDRESS 1604 SW 9TH STREET  
CITY-ST-ZIP FORT LAUDERDALE, FL 33312

TITLE D  
NAME SPARKES, RICHARD  
STREET ADDRESS 1604 SW 9TH STREET  
CITY-ST-ZIP FORT LAUDERDALE, FL 33312

TITLE D  
NAME JOHNSON, MATTHEW  
STREET ADDRESS 1604 SW 9TH STREET  
CITY-ST-ZIP FORT LAUDERDALE, FL 33312

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

1/22/07

954-522-6298