2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000085709

Entity Name: SIGNS BY YOU, INC.

FILED Apr 30, 2004 Secretary of State

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

RR 9 BOX 778-3 494 SW BLAYLOCK CT STE. 3 LAKE CITY, FL 32024

LAKE CITY, FL 32024

Current Mailing Address: New Mailing Address:

RR 9 BOX 778-3 494 SW BLAYLOCK CT STE. 3 LAKE CITY, FL 32024

FEI Number: 20-0131844 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LAURA, WILLEMS A
RR. 9 BOX 778-3
STE. 1
LAURA, WILLEMS A
494 SW BLAYLOCK CT
LAKE CITY, FL 32024 US

LAKE CITY, FL 32024 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: LAURA WILLEMS 04/30/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SHANE, WILLEMS D
 Name:
 SHANE, WILLEMS D

 Address:
 RR. 9 BOX 778-3, STE.1
 Address:
 494 SW BLAYLOCK CT

 City-St-Zip:
 LAKE CITY, FL 32024 US
 LAKE CITY, FL 32024 US

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

 Name:
 BERNARD, WILLEMS C
 Name:
 BERNARD, WILLEMS C

 Address:
 RR 9 BOX 785-5
 Address:
 494 SW BLAYLOCK CT

 City-St-Zip:
 LAKE CITY, FL 32024 US
 City-St-Zip:
 LAKE CITY, FL 32024 US

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

 Name:
 LAURA, WILLEMS A
 Name:
 LAURA, WILLEMS A

 Address:
 RR 9 BOX 778-3, STE 1
 Address:
 494 SW BLAYLOCK CT

 City-St-Zip:
 LAKE CITY, FL 32024 US
 City-St-Zip:
 LAKE CITY, FL 32024 US

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: LAURA WILLEMS ST 04/30/2004