

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000137101

Entity Name: COMPLETE SIGNS, INC.

FILED
Feb 20, 2006
Secretary of State

Current Principal Place of Business:

10633 N.W. 53ST
SUNRISE, FL 33351 US

New Principal Place of Business:

Current Mailing Address:

10633 N.W. 53ST
SUNRISE, FL 33351 US

New Mailing Address:

FEI Number: 41-2117352 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLAUSEN, DREW S
8036 NW 28 PL
SUNRISE, FL 33322 US

Name and Address of New Registered Agent:

CLAUSEN, DREW S
10633 N.W. 53 STREET
SUNRISE, FL 33351 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: DREW S. CLAUSEN

02/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SOFIELD, LARRY
Address: 10633 NW 53 ST
City-St-Zip: SUNRISE, FL 33351 US

Title: VP () Delete
Name: CLAUSEN, DREW S
Address: 10633 NW 53 ST
City-St-Zip: SUNRISE, FL 33351 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLAUSEN, DREW S
Address: 10633 NW 53 ST
City-St-Zip: SUNRISE, FL 33351 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Change (X) Addition
Name: CLAUSEN, JODI
Address: 10633 NW 53 ST
City-St-Zip: SUNRISE, FL 33351 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: DREW S. CLAUSEN

P

02/20/2006

Electronic Signature of Signing Officer or Director

Date