

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000153178

FILED
May 01, 2006
Secretary of State

Entity Name: SPHINX SIGN CORPORATION

Current Principal Place of Business:

141 E. HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

Current Mailing Address:

141 E. HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441

New Mailing Address:

FEI Number: 20-1855974

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E. SAMPLE RD
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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:

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:

Title: D () Delete
Name: PEREIRA, LUCIMARA SERVO
Address: 941 LYONS RD., APT 5103
City-St-Zip: COCONUT CREEK, FL 33063

Title: D () Delete
Name: BORGES PEREIRA, STENIO J
Address: 941 LYONS RD., APT 5103
City-St-Zip: COCONUT CREEK, FL 33063

Title: D () Delete
Name: PEREIRA, ANDRE
Address: 941 LYONS RD., APT 5103
City-St-Zip: COCONUT CREEK, FL 33063

Title: D () Delete
Name: PEREIRA, ADILSON
Address: 5852 EAGLE CAY TERRACE
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PEREIRA, LUCIMARA S
Address: 941 LYONS RD., APT 5103
City-St-Zip: COCONUT CREEK, FL 33063

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

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

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

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: LUCIMARA PEREIRA

D

05/01/2006

Electronic Signature of Signing Officer or Director

Date