

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000007797

FILED
Jul 10, 2006
Secretary of State

Entity Name: ROADRUNNER SIGNS CORP

Current Principal Place of Business:

3605 D COMMERCE BLVD
KISSIMMEE, FL 34741 US

New Principal Place of Business:

4325 PINE TREE DR.
ST. CLOUD, FL 34772 US

Current Mailing Address:

3605 D COMMERCE BLVD
KISSIMMEE, FL 34741 US

New Mailing Address:

4325 PINE TREE DR.
ST. CLOUD, FL 34772 US

FEI Number: 20-2161296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEGRON, ELIAS
3605 D COMMERCE BLVD
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

NEGRON, ELIAS
4325 PINE TREE DR.
ST. CLOUD, FL 34772 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:

07/10/2006

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: V () Delete
Name: NEGRON, ELIAS
Address: 3605 D COMMERCE BLVD
City-St-Zip: KISSIMMEE, FL 34741 US

Title: P () Delete
Name: NEGRON, NATIVIDAD
Address: 3605 D COMMERCE BLVD
City-St-Zip: KISSIMMEE, FL 34741 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: NEGRON, ELIAS
Address: 4325 PINE TREE DR.
City-St-Zip: ST. CLOUD, FL 34772 US

Title: P (X) Change () Addition
Name: NEGRON, NATIVIDAD
Address: 4325 PINE TREE DR.
City-St-Zip: ST. CLOUD, FL 34772 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: ELIAS NEGRON

OWNE

07/10/2006

Electronic Signature of Signing Officer or Director

Date