2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000090211

Entity Name: PUBLI SIGNS, INC.

City-St-Zip:

QUEBEC, CANADA, CA H9B 1LS CA

FILED Jan 28, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:	
1001 N. FEDERAL HIGHWAY SUITE 349 HALLANDALE, F 33009 US				250 NORTH DIXIE HIGH BAY 5 HOLLYWOOD, FL 3302	
Current Mailing Address:				New Mailing Address:	
1001 N. FEDERAL HIGHWAY SUITE 349 HALLANDALE, F 33009 US				250 NORTH DIXIE HIGHWAY BAY 5 HOLLYWOOD, FL 33020 US	
FEI Number:	•	FEI Number Applied For()	FEI Nur	nber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:	
BERNSTEIN, JEFFREY A ESQ. 100 N. BISCAYNE BLVD. SUITE 1001 MIAMI, FL 33132 US				BERNSTEIN, JEFFREY A ESQ. 100 N. BISCAYNE BLVD. SUITE 1602 MIAMI, FL 33132 US	
The above in the State		ubmits this statement for the p	ourpose o	of changing its registered of	office or registered agent, or both,
SIGNATURE: JEFREY A. BERNSTEIN, ESQ.					01/28/2009
	Electron	ic Signature of Registered Age	ent		Date
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BENSADON, GE 53 ROGER PILO	Delete ERARD DN, DOLLARD-DES-ORMEAUX DA, CA H9B 1A9 CA		Title: (Name: Address: City-St-Zip:) Change ()Addition
Title: Name: Address: City-St-Zip:	me: BENSADON, MONIQUE dress: 53 ROGER PILON, DOLLARD-DES-ORMEAUX		Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	BANON, VALER	Delete IE IVE, DOLLARD-DES-ORMEAUX		Title: (Name: Address:) Change ()Addition

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: GERARD BENSADON P 01/28/2009