

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000124482

Entity Name: SIGNWAVE GRAPHICS & AWARDS, INC.

FILED  
Apr 25, 2008  
Secretary of State

**Current Principal Place of Business:**

3720 SUNTREE BLVD., SUITE 120  
MELBOURNE, FL 32940

**New Principal Place of Business:**

2825 BUSINESS CENTER BLVD D8  
MELBOURNE, FL 32940

**Current Mailing Address:**

PO BOX 410096  
MELBOURNE, FL 32941

**New Mailing Address:**

FEI Number: 20-3449445      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LEWIS, CHARINE  
3270 SUNTREE BLVD  
SUITE 120  
MELBOURNE, FL 32940 US

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

LEWIS, CHARINE  
2825 BUSINESS CENTER BLVD  
D8  
MELBOURNE, FL 32940 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:

04/25/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: LEWIS, CHARINE  
Address: 3720 SUNTREE BLVD., SUITE 120  
City-St-Zip: MELBOURNE, FL 32940

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: SD (X) Change ( ) Addition  
Name: LEWIS, CHARINE  
Address: 2825 BUSINESS CENTER BLVD D8  
City-St-Zip: MELBOURNE, FL 32940

Title: PTD ( ) Change (X) Addition  
Name: RAMPP, KIMBERLY K  
Address: 2825 BUSINESS CENTER BLVD D8  
City-St-Zip: MELBOURNE, FL 32940

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.

SIGNATURE: KIMBERLY RAMPP

P

04/25/2008

Electronic Signature of Signing Officer or Director

Date