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Apr 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000070687 (7)

1. Corporation Name
SLEEPING GIANTS ADVERTISING & CREATIVE SERVICES,
INC.,

Principal Place of Business
3409 NW 9 AVE
SUITE 1101
FT. LAUDERDALE FL 33309

Mailing Address
3409 NW 9 AVE
SUITE 1101
FT. LAUDERDALE FL 33309-5945



3. Date Incorporated or Qualified
10/05/1993
3a. Date of Last Report
02/27/1996

4. FEI Number
65-0444845
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

TORRES, RONALD R
MERCEDE PARKVIEW BLDG.
1880 N UNIVERSITY DR.
PLANTATION FL 33322

10. Name and Address of New Registered Agent

81 Name IRA Herschbein
82 Street Address (P.O. Box Number is Not Applicable)
7777 Glades Rd. Ste. 209
83
84 City Boca Raton FL 85 Zip Code 33434

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE 4/1/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	GOODWIN, GLEN N	
STREET ADDRESS	3100 NW 10TH STREET #205	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	VPAS	DELETE
NAME	ROMINGER, SANDY	
STREET ADDRESS	5410 LYONS RD #104	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE	VPAS	DELETE
NAME	HERNANDEZ, REY	
STREET ADDRESS	311 OREGON LANE	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VP	Change	Addition
1.2 NAME	Goodwin, Glen		
1.3 STREET ADDRESS	1060 SW 46 AVE. Apt. 107		
1.4 CITY-ST-ZIP	Pompano Bch. FL 33069		
2.1 TITLE		Change	Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or its receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed from an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.10.96

Date

954-561-7748

Daytime Phone #

CR2E034 (9/96)