

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000004146

FILED
Apr 30, 2008
Secretary of State

Entity Name: GARCIA SIGNS PROPLASTICS, INC.

Current Principal Place of Business:

454 NW 22ND AVE.
MIAMI, FL 33125

New Principal Place of Business:

454 NW 22ND AVE.
103
MIAMI, FL 33125

Current Mailing Address:

454 NW 22ND AVE.
MIAMI, FL 33125

New Mailing Address:

454 NW 22ND AVE.
103
MIAMI, FL 33125

FEI Number: 65-0053613

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, SONIA
454 NW 22ND AVE.
MIAMI, FL 33125 US

Name and Address of New Registered Agent:

GARCIA, SONIA
454 NW 22ND AVE.
103
MIAMI, FL 33125 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: _____

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: GARCIA, SONIA
Address: 454 NW 22ND AVE.
City-St-Zip: MIAMI, FL 33125

Title: DVT () Delete
Name: GARCIA, LESLIE
Address: 454 NW 22ND AVE.
City-St-Zip: MIAMI, FL 33125

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: SONIA GARCIA

DPS

04/30/2008

Electronic Signature of Signing Officer or Director

Date