FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 12 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400007183 (4)

AMERICAN POLITICAL SIGNS OF FLORIDA II, INC.

Principal Place of Business		Mailing Address				a sudriedt nim imitt dante matte matte duter dant dante idual eine iber		
2321 PEMBROKE ROAD		2321 PEMBROKE ROAD						
HOLLYWOOD FL 33020		HOLLYWOOD FL 33020						
						DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified 01/20/1994		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		pplied For
21		26				65-0471675	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional		
22		27				Fee Required		
City & State		City & State				6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution	Added	to Fees
Zip	Zip Country Z		Zip Country			8. This corporation owes or has paid the current year Intangible		
24	25	29	30			Personal Property Tax due June 30.		□ No
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered	Agent	
	'uart, barbara		1	B1	Name			
23	21 PEMBROKE ROAD	62 Street A		Street Addre	ess (P.O. Box Number is Not Acceptable)	•		
HC	DLLYWOOD FL 33020		Ĺ					
			T	33				
			ļ.	84 (City		las I z-	Code
			'	' ا**	City	FL	85 Zip	Code
11, Pursuant	to the provisions of Sections 607.050.	2 and 607.1508, Florida Sta	atutes, the abo	ove-r	named corpo	pration submits this statement for the purpose of	fchanging	its registered
office or r	ecistered agent, or both, in the State	of Florida, Such change wa	as authorized	by th	he corporation	on's board of directors. I hereby accept the ap	pointment a	s registered
Z .	Y WOON THINK		The A	1	not			
SIGNATUR	Signature, typed or printed name of registered age	rt and litre if applicable (NOTE Registered	Agent	signature require	d when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12
TITLE	PS	DELETE	1.1 TITL	.E			Change	Addition
NAME	STUART, BARBARA		1.2 NAN	AE.				
STREET ADDRESS	4525 NW 64TH TERR		1.3 STR	1.3 STREET ADDRESS				
CITY-ST-ZIP	LAUDERHILL FL			1.4 CITY-ST-ZIP				
TITLE	VP	DELETE	2.1 TITL		-		Change	Addition
NAME	STUART, CHARLES J	_	2.2 NAN					
STREET ADDRESS	4525 NW 64 TERR			REET ADDRESS				-
	LAUDERHILL FL							
CITY-ST-ZIP TITLE	— 1999 1 100 1 100 1 100 1 100 100 100 10	DELETE	2.4 CIT 31 TITL		-211		Change	Addition
NAME				32 NAME			THE CHANGE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
					000000			
STREET ADDRESS			3.3 STR					l
CITY-ST-ZIP		DELETE	3.4. CIT		- 4117		Change	Addition
TITLE			4.1 TITL				C Auguge	
NAME			4. 2 NAI					l
STREET ADDRESS			4 3 STR					
CITY-ST-ZIP		I	4.4 City		ZIP		T-1 3	
TITLE		☐ DELETE	51 TITL				Change	Addition
NAME			5 2 NAM	AE				l
STREET ADDRESS			5 3 STR	EET AD	DDRESS			l
CITY-ST-ZIP			5.4 CITY	/- SI-	ZIP			
TITLE		☐ DELETE	61 Tritu	E	1	···	Change	☐ Addition
NAME			62 NAA	AŁ.	j			l
CTRECT ANDRESS			a72 c a	ESY AN	nnpree			

14. 1 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 the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 shanged, or on an attachment with an address.