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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000032798 (8)

U.S. SIGNS, INC.									
Principal Plac 9625 DENTON HUDSON FL 34	AVE. UNIT 4	Mailing Address 8625 DENTON AVE. UNIT HUDSON FL 34867-5201	4			- ( I I BATHERF I I BAITH BIRLIN BOTH FOR I RADA 	<b>18161</b> 1141 <b>0</b>	, JIJIII IDDIU IBII	H 1811 1001
:						3. Date Incorporated or Qualified 04/29/1994		ate of Last F 29/1996	Report
2. Principal P	lace of Business	2a. Mailing Address	Mailing Address			4. FEI Number	Applied For		
21		26				59-3247554	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired			Additional Required
City & State	e	City & State				Election Campaign Financing     Trust Fund Contribution			May Be
Z(p	Country 25	Zip 29	Count	ry		8. This corporation has liability for	intangible <b>3</b> Yes		s. 199.032,
( <del>5.7</del> 1	g, Name and Address of Currer		1901			10. Name and Address of New Re			
COO	PER, SIDNEY P		8	1	Name		<del></del>	<del></del>	
9625	DENTON AVE		82 Street Ad		Street Addre	ess (P.O. Box Number is Not Acceptab	ol <b>e)</b>	<del></del>	<del></del>
#4 PALI	M HARBOR FL 34685		8	3	··· .,		<del></del>	<del> </del>	
			8	4	City		FL	85 Zip	Code
11. Pursuant office or ragent La	to the provisions of Sections 607 050 egistered agent, or both, in the State im familiar with, and accept the oblig	2 and 607.1508, Florida Statu of Florida. Such change was ations of, Section 607.0505, Fi	tes, the abo authorized l lorida Statut	ve- by t	named corporation	oration submits this statement for the pon's board of directors. I hereby accept		of changing in pointment as	its registered s registered
SIGNATURE.	Signature, typed or printed hame of registered age	ant and title if applicable (NO	TE Registered A	oent	t signature require	d when rainstating)	DATE		
12.	OFFICERS AN		13.	•		ADDITIONS/CHANGES TO OFFIC		D DIRECTO	RS IN 12
TITLE	P	DELETE	1.1 TITLE					Change	Addition
NAME	COOPER, SIDNEY P		1.2 NAM	E					
STHEFT ADDRESS	1642 LAGO VISTA BLVD		1.3 STRE	ET A	DDRESS				
CITY-ST-ZIP	PALM HARBOR FL 34685	DELETE	1.4 CITY	_	ZIP		<del></del>		114100
TITLE	S   Cooper, Susie	☐ DETEIR	2.1 TITLE					Change	Addition
NAME STREET ADDRESS	1642 LAGO VISTA BLVD.		2.2 NAM 2.3 STRE		DODECC				
CITY-ST-ZIP	PALM HARBOR FL 34685		2.3 SINE.				. 4		
TITLE		DELETE	3.1 TITLE		* Z0F			Change	Addition
NAME			3.2 NAM	Ε	ŀ			<u>-</u>	
STREET ADDRESS			3.3 STRE	ET AI	DDRESS				
CITY-ST-ZIP			3.4. CłTY	- 51	-ZIP	•			
TITLE		☐ DELETE	4.1 TITLE					☐ Change	Addition
NAME			4. 2 NAM	E					
STREET ADDRESS			4.3 STRE	ET AI	Doress				
EITY - ST - ZIP			4.4 CITY		ZIP				
Title		☐ DELETE	5.1 TITLE					☐ Change	
NAME			5.2 NAMI						
STREET ADDRESS			5.3 STRE						
C(TY-S1-7)P TITLE		DELETE	5.4 CITY-1		ZIP			☐ Change	Addition
NAME		E-1 OLLCIL	6.2 NAM					many unanys	Addition
STREET ADDRESS			6.3 STRE		DUBERS				
CITY - ST - ZIP			6.4 CITY						
14. Ldo hereb	by certify that the information supplie	d with this filing does not quali	ify for the ex	en	ntion stated	In Section 119.07(3)(i), Florida Statute	s. I furthe	er certify that	t the
l informatio	in indicated on this annual report or s	sunniemental annual report is t	true and acc	CA IES	ate and that i	my signature shall have the same lega as required by Chapter 607, Florida S	l affort o	s if made un	oder oath: that