2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000034709 1. Entity Name A & A SIGN CO.							03 JUL 14 PM 7:31			
Principal Plac 7271 NW 77T MIAMI FL		s	Mailing Address 7271 NW 77TH STREET MIAMI FL				SECRETARY OF STATE TALLAHASSEE. FLORIDA			
2. Principal P	Place of Busin	ness	3. Mailing Address							
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.			7	CHECK HERE IF MAKING CHANGES			
City & Stat	te		City & State			4.	FEI Number 59-1541037	——————————————————————————————————————	oplied For ot Applicable	
Zip Country			Zip Country		try	5.	Certificate of Status Desired	\$8.75 Add		
	6. Name	and Address of Current	Registered Agent	_ ~		7,_	Name and Address of New Register	ed Agent		
Name									}	
7271 NW 77TH STREET						(P.O. E	3ox Number is Not Acceptable)			
MIAMI FL										
i.					City			Zip Cod	e	
8. The above named entity submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE Signature, speed or brinniad name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE ON TEXT PROBLEM 1. (NOTE: Registered Agent signature required when reinstating)										
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State							Election Campaign Financing Trust Fund Contribution.		May Be it to Fees	
10.		OFFICERS AND	DIRECTORS	11.		ΑI	DDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bernard 7271 NW Miami Fl	, fred 77th street	☐ Delete				000021564 07/15/0301021024	□ Change • 55 □ • **150,0	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP			Delete			- ·		- Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	4				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		į.			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete		1			☐ Change	Addition	
12. I 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 report or supplimental 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if										

SIGNATURE AND TYPED OR PRINTED RAME OF SIGNING OFFICER OR DIRECTOR

Davis Phone #

July 7, 2003

Mr. Sean Toner,

Mr. Toner, we spoke earlier this day regarding a previously filed corporate renewal for my company. I am trying to determine where the payment was applied and documentation from my bank.

In the interim I have enclosed payment again for renewal with the understanding a refund will be made if proof of payment can be established.

Lappreciate your efforts on our behalf.

Sincerely, / Second ic B. Bernard