<u> </u>	r LL/		ALL INOT	NOOTI	DINO DEI OIKE		/IVII LL ! I	110 11110) i Oi (ii)	/ 1.		
l	RPORATION STATEMENT		S	ecretary	MENT OF STATE of State	E			03			
DOCUMENT # P 9 4 0 0 0 0 6 5 6 8 3 (2) 1. Corporation Name SIGN IT NOW, INC.							03 NUG 27					
916N 11 100 W, 11 - 1							# 8: 55					
2. Principa	SANDP	IPERR	D 32-57					# 000021130900 06/25/0301024005 **1200.00				
Suite, Apt. #, etc.			/	Suite, Apt. #, etc.			4. Date Incorporated or Qualified To Do Business in Florida					
City & State TAMPA, EL.			City & State	TAMPA, EL			5. FEI Number Applied For Not Applied For Not Applicable					
33(609 Count	^y 5 <i>H</i>	338 G		Country US:19	6		OF STATU\$ DE	SIRED 🗌		inalfencepted licatedStatus	
7 ,			7. N	ame and Add	dress of Current Regis	stered #	Agent					
	Name RAYMOND A. CLARK Street Address (P.O. Box Number is Not Acceptable) 37 5 401 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0											
	Street Address (P.O. Box Number is Not Acceptable)							0108	8003	**65.	00	
	32 SANDPIPER RD, Suite Apt. #. Etc.							<u></u>				
ĺ	, , , , , ,							1				
	City TAI			State Zi	Code 336	09						
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent Date 6 7 7 7 7 7 7 7 8 8 8 1 1 1 1 1 1 1 1 1 1												
			REGISTERED AGI				-			 -		
9. Names	and Street Addresses	Name of	nd/or Director (Flor	Director (Florida nonprofit corporations must list at leas						.		
Titles	Office		Street Address of Each Officer and/or Director					City / S	itate / Zip			
<u>D</u>	Donc	R. C	LARK	32 5	SAND PIP	ER	RD.	TAM	PAJ	C 1, 3	33609	
P	RAYMO	N) A.C	LARK	325	ANDPIT	7151	< RD	TIM	PAIR	2/3	3609	
5	SHEILI	9 M.	CLARK	"	/1	-	11		, ,		(1	
						_						
	<u> </u>							<u> </u>		<u></u>		
this rein owed by on this a	nstatement application y the corporation have application is true and	i, the reason for di been paid and th	ssolution has been e names of individu	eliminated, thus also listed on the	execute this application and corporate name satisting form do not qualify the egal effect as if made un	fies the for an e	requirements exemption unde	of section 607.	0401 or 617 07(3)(i), F.S.	.0401, F.S., The informa	, that all fees	
SIGNAI	SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day Daytime Phoye #											

CD25081 (40/02)

Date/Time June 20, 2003

pgs. 3 including this one.

To: Div. of Corp. Vc #: 850 245 6059

To: Justin M. Shivers

From: Sign It Now, Inc.

FEI#: 59-3262298

RAY CLARK, PRES.

Subject: Reinstatement (Corp.)

REF# P9400065683

Attached please find Corp. Reinstatement form completed along with a che
\$1,200.00. as per attached letter of May 29, 2003 and a further telephone conversation regarding the waived \$600. penalty.

Pld not received Annual Report for 1996 Attached please find Corp. Reinstatement form completed along with a check for

Did not received Annual Report for 1996

Your Document Specialist related by phone that since the notices had been going to the wrong address, there would be no \$600. penalty payment required.

Thank you for your cooperation and understanding,

Raymond A. Clark, Pres.