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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400069167 (2)

SIGN - MART, INC

Principal Place of Business Mailing Address 9770 S. MILITARY TRAIL 9770 S. MILITARY TRAIL SUITE 8-7 #206 BOYNTON BEACH FL 33436 SUITE 8-7 #206 BOYNTON BEACH FL 33436-3207 3a. Date of Last Report 3. Date Incorporated or Qualified 09/16/1994 05/01/1996 2a, Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 65-0518273 Not Applicable 26 Suite, Ant. #, etc. Sulte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country 8, This corporation has liability for intangible tax under s. 199.032,
 Florida Statutes Yes No Country Zip Zip 24 25 29 30 g, Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 VIDSON Glenn Davidson, Glenn 7326 LAKE WORTH RD 82 LAKE WORTH FL 33467 83 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corpora
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation
agent. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. on submits this statement for the purpose of changing its registered board of directors. I hereby accept the appointment as registered DAUIDSOM ne of registered agent and title if applicable -lenn SIGNATURE OFFICERS AND DIRECTORS (96/6) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 DPST DELETE 1.1 TITLE TITLE DAVIDSON, GLENN CR2E034 NAME 12 NAME 5182 MARK DRIVE STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BEACH FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP Change Addition DELETE 21 TITLE TITLE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP DÉLETÉ Change Addition 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP 14. I do 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.