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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000002428 (7) DOCUMENT #

MADISON DISPLAYS, INC.

FILED Mar 25 1998 8:00am Secretary of State



Dain air at Olasa	- I Durings	Adultina Batalana			
Principal Place of Business Mailing Address					
35310 HWY 54 W ZEPHYRHILLS FL 33541		35310 HWY 54 W ZEPHYRHILLS FL 33541			
ZEPHINHILLS PL 33341		ZEPHINHILLS PE 33941		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				01/10/1995	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3291878	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	•	5. Certificate of Status Desired	\$8.75 Additional
22		27		5, Costinuate of Citates Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
24	25	29	30]		☐ Yes ☑ No
1.00	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registered	Agent
Tilde, Order					
35310 HWY 54 W 82 Street Address (P.O. Box Number is Not Acceptable)					
ZEF	PHYRHILLS FL 33541				
			83		
			84 City		85 Zip Code
				FL	•
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
	Signature, typad or printed name of registered ag		TE: Registered Agent signature require		
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D DILL CARL D	☐ DELETE	1.1 TITLE		Change Addition
NAME	HILL, CARL D		1.2 NAME		
STREET ADDRESS	35310 HWY 54 W		1.3 STREET ADDRESS		
CITY-ST-ZIP	ZEPHYRHILLS FL 33541		1.4 CITY-ST-ZIP		
TITLE	D CONTROL V	☐ DELETE	2.1 TITLE		Change Addition
NAME	HILL, KIMBERLY A		2.2 NAME		
STREET ADDRESS	35310 HWY 54 W		2.3 STREET ADDRESS		•
CITY-ST-ZIP	ZEPHYRHILLS FL 33541		2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TATLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		······	4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		1
STREET ADDRESS			5.3 STREET ADDRESS		1
CITY-ST-ZIP			5.4 CITY-ST-ZIP	,, ==	
TITLE		DELETE	6.1 TITLE	J	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 changett, or on an attachment with an address.					