FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 11, 2002 8:00 am Secretary of State DOCUMENT # P95000018677 1. Entity Name SIGN SUPPLY USA OF ORLANDO, INC. 04-11-2002 90714 014 ***150 00 Principal Place of Business Mailing Address 7101 PRESIDENTS DR 7101 PRESIDENTS DR SUITE 350 SUITE 350 ORLANDO FL 32809 ORLANDO FL 32809 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3300835 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent *** ** Name ROONEY, DANIEL P Street Address (P.O. Box Number is Not Acceptable) 395 AVENUE C, N.W. WINTER HAVEN FL 33881 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE ☐ Change ☐ Addition NAME THOMPSON, RICHARD NAME STREET ADDRESS 10695 EUREKA STREET STREET ADDRESS CITY-ST-ZIP BOCA RATON FL 33428 CITY-ST-ZIP P/D TITLE / Addition Delete ☐ Change Christopher McInerney 7 Memorial Street NAME HURT, BARRY S STREET ADDRESS STREET ADDRESS 144 LAKE SEARS DRIVE CITY-ST-ZIP Deerfield, MA 01342 WINTER HAVEN FL 33880 CITY-ST-ZIP TITLE Delete TITLE Change Addition Christopher Thompson NAME BERKNER, GEORGE NAME 2461 NW 11240 AVE STREET ADDRESS 6135 N 51ST PLACE STREET ADDRESS CITY-ST-ZIP PARADISE VALLEY AZ 85253 CITY-ST-ZIP TITLE ☐ Delete TITI F Addition NAME NAME John Stevens 12820 Marsh Point Way STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Palm Beach Gardens FL 33418 TITLE ☐ Delete Addition TITLE ☐ Change Christine Mever NAME NAME 3741 Pelican Bay Ct. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

4-5-02 Date