## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

## 1996

SIGNATURE:

DOCUMENT # 1. Corporation Name

P95000028992 (2)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANK'S TRAFFIC SIGNAL, INC.

Principal Place of Business Mailing Address				
1403 S.W. 82ND AVE. NORTH LAUDERDALE FL 33068		1403 S.W. 82ND AVE. NORTH LAUDERDALE FL 33068		
				3. Date Incorporated or Qualified 3a. Date of Last Report 04/03/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For
Suite Act II atc		26		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State		City & State	***************************************	
3		28		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees
Zip	Country	7ip	Country	8. This corporation has liability for intangible tax under s 199,032,
4	25	29	30	Florida Statutes Yes No
	9. Name and Address of Currer	nt Registered Agent	B1 Name	10. Name and Address of New Registered Agent
MANUE	OTT FOARIUME F			
Manhertz, Franklin e 1403 S.W. 82ND Ave. North Lauderdale Fl 33068			82 Street Ad	dress (P.O. Box Number is Not Acceptable)
			83	
W 100C1	10/100 1 E 00000			
			84 City	FL 85 Zip Code
14 Pursuant to or registerer	o the provisions of Sections 607.0502 od agent, or both, in the State of Flori n, and accept the obligations of, Sect	? and 607.1508, Florida Statut da. Such change was authoriz	les, the above named corp red by the corporation's bo	poration submits this statement for the purpose of changing its registered office pard of directors. I hereby accept the appointment as registered agent. I am
	i, and accept the congutation on cook	εφισιώνας κυποί τουσο. τοθ ΠΟΚ	<b>&gt;</b> .	
SIGNATURE:	Signature, typod or printed rame of registered agent	Land title if applicates. (NC	OTE: Registered Agent signaturi; requ	irod when recisiong) DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1 1 TITLE	Change Addition
NAME DIOCCE ADDRESS	MANHERTZ, FRANKLIN E		12 NAME	
STREET ADDRESS	9340 N.W. 35TH PL. SUNRISE FL 33351		1.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	D	[ ] DELETE	1.4 CiTY-ST-7IP 2. 1 TITLE	□ Changa □ Addition
NAME	POTOPSINGH, FREDERICK	<b>4</b>	2.2 NAME	Change Addition
STREET ADDRESS	9340 N.W. 35TH PL.		2.3 STREET ADDRESS	
CITY-ST-ZIP	SUNRISE FL 33351		2.4 CHY-ST-ZIP	
TITLE	D	DELETE.	3. 1 TITLE	Change Addition
NAME	MINOTT, DOREEN		3.2 NAME	-
STREET ADDRESS	1403 S.W. 82ND AVE. NOR	ATH .	3.3. STREET ADDRESS	
CITY - ST - ZIP	LAUDERDALE FL 33068		3 4 CHY-\$1 - 7:P	
THILE		☐ DELETE	4. 1 TITLE	Change Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADORESS	
CITY - ST - ZIF TITLE		DELETE	4.4 CITY-ST-ZIP 5. 1 TITLE	Change C Addition
NAME		L] become	5.2 NAME	1000163525Change Addition -05/22/9601104003
STREET ADDRESS			5.3 STREET ADDRESS	***200.00
CITY-ST-7⊮			5.4 CHY+ ST-ZIP	ուստել (ՄՄ) - (ՄՄ)
TITLE		DELETE	6 1 TITLE	Change Addition
NAME			6.2 NAME	51.96
STREET ADDRESS			63 STREET ADDRESS	3=(5/0
C17Y-S1-7P		······································	64 CiTY+ST-ZIP	QUED -
oath; that I a	me iniomialion fidicaled on ms annu	ial report or supplementa: anni iration or the receiver or trust <b>e</b>	i <b>ua</b> l report is true and accui <b>e e</b> mpowered to execute th	r for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further rate and that my signature shall have the same logal effect as if made under his report as required by Chapter 607, Florida Statutes; and that my name

(\$4).777-3124 Daytinio Phone #