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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortnam

Secretary of State

DIVISION OF CORPORATIONS

1. Corporation Name	DOCUMENT # 1. Corporation Name	P95000042800	(9)
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	SIGNS ASSOCIATES, INC.		-		
Principal Place of Business Mailing Address 6516 24TH AVENUE EAST 6516 24TH AVENUE EAST BRADENTON FL 34206 BRADENTON FL 34206			, reenteer tre recet eritt eente eent eent eent eritt eritt eret eritt eritt eritt eritt eritt eritt eritt eritt		
					Date Incorporated or Qualified O5/31/1995 3a. Date of Last Report
	ace of Business	2a. Mailing Address			4. FEI Number Applied For
		26			65-0599792 Not Applicable
Suite, Apt. #	F, BIC.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
City & State		City & State			Fee Required 6. Election Campaign Financing \$5.00 May Ro
3		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip D	Country	Zip Coun		ry	8. This corporation has liability for intangible tax under s 199.032,
1	9. Name and Address of Curre	nt Registered Acous	30		Florida Statutes Yes No
	a. Hame bits Address of Coffe	iit negistereo Agent	8	1 Name	10. Name and Address of New Registered Agent
OZARK.	Damian M				
	NATEE AVENUE WEST		8	2 Street	Address (P.O. Box Number is Not Acceptable)
Braden	TON FL 34205		6	3	
			Ä	4 City	los 7. O. I
				* ",	proporation submits this statement for the purpose of changing its registered offices board of directors. I hereby accept the appointment as registered agent, I am
BIGNATURE _	Signature, typed or printed namic of registered ager OFFICERS AN	nt and title Campinsable (NOTE - Registered Ag	ent signature r	required when reinstaling! ADDITIONS/CHANGES TO OFFICERS AND DIBECTORS IN 12
ITLÉ	D	☑ DELETE	1. 1 TITU		BOMBER, ROBERT Q Change Addition
IAME	BOMBER, ELOISE	÷	. 1.2 NAM	:	6516 24Th AUE. EAST.
TREET ADDRESS	6516 24TH AVENUE EAST	•	1	ET ADDRESS	BRADENTON, FL 34200,
ITY-ST-ZP ITLE	BRADENTON FL 34208	☐ DELETE	14 GITY- 2 1 TIFLI		
AME		L_J becker	2 2 NAM!		Change Addition
TREET ADDRESS				T ADDRESS	
ITY - ST - 21P			2 4 CITY -		
TLE		[] DELETE	3 1 THE		Change Addition
AME			3.2 NAME		
TREET ADDRESS			3.3 \$TRE	ET ADDRESS	
TLE		F7 Mustr	3.4 CITY		
AME		DELETE	4 1 1111.6		Change Addition
REET ADDRESS			4.2 NAME	T ADDRESS	
TY-ST-ZIP			4.4 CITY-		
TLE		DECETE	5 1 Title	+	Change Addition
AME			5.2 NAME		
TREET ADDRESS			53STREE	T ADDRESS	
TY-ST-ZIP		7	5 4 CITY -		
ILE		[_] DELETE	6 1 TITLE		Cnange Addition
AME			6.2 NAME		
TREET ADDRESS				TADDRESS	
11Y-ST-ZIP 4. I do hereby	certify that the information supplied	with this filing is voluntarily for	64 CITY- roished and do	as not our	 alfy for the exemption stated in Section 119.07(3)(k), Florida Statutes. Hurther
oath; that I		ua report or supplemental an oration or the receiver or trust	inual report is ti ec ommoviared		courate and that my signature shall have the same legal effect as if made under the this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

SIGNATURE AND TYPED OR FRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96 941 747-770