2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 05, 2004 8:00 am Secretary of State

DOCUMENT # P95000054087 1. Entity Name AAA SIGNATURE HOME DESIGNS, INC.					05-05-2004 90238 026 ***150.00			
Principal Place of Business 15 W STRONG ST. #STE 24B PENSACOLA, FL 3250T 2 IO E CHURCH ST. PENSACOLA, FL 3250T 2 IO E CHURCH ST. PENSACOLA, FL 32502				· 2502				
2. Principal P 26 Suite, Apt.	E. CHURCH ST.	3. Mailing Address Suite, Apt. #, etc.	HURCH.	04292004	Chg-P	CR2E034 (10/03)		
PENS	SACOLA, FL.	PENSACOIA	yFL.	4. FEI Numbe 59-3329		No	plied For t Applicable	
3250		32502	Country SA	5. Certificate	of Status Desired	S8.75 Add Fee Required	itional	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name 1								
BARKSDALE, KEN DARKSDALE								
15 W STRONG ST STE 24B PEMSACOLA, FL 32501				Street Address (P.O. Box Number is Not Acceptable)				
				City PENSACOLA FL Zip Core En 2				
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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE Solution, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution: Added to Fees								
TITLE A SUPPLE	OFFICERS AND D	MRECTORS Delete	11.	ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTORS		
NAME	BARKSDALE, KEN	U Delete	NAME	KEN BAR	SOPLE	Change	Addition	
STREET ADDRESS CITY-ST-ZIP	15 W STRONG ST., STE 24B PENSACOLA, FL 32501		STREET ADDRESS CITY-ST-ZIP	216 E.C DENSAC	HUKCH OLD FL	ST. .32 <i>502</i> .		
TITLE		. Delete	TITLE	C 1001	- 71 -	☐ Change	Addition	
NAME., STREET ADDRESS			NAME STREET ADDRESS					
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12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all ether like empowered.								