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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000088150 (4)

KOCHANOWSKI INNOVATIVE SIGN TECHNOLOGY, INC. ALL SIGN PRODUCTS, INC.

2/24

Principal Place of Business

Mailing Address

FILED May 08 1997 8:00am Secretary of State



5068 NW 90TH CORAL SPRING		5088 NW 90TH TERRA CORAL SPRINGS FL			
				3. Date incorporated or Qualified 11/16/1995	3a. Date of Last Report 05/01/1996
2. Principa P	lace of Business	2a. Mailing Address		4, FEI Number	Applied For
21		26		65-0632829	Not Applicable
Suite, Apt. #. etc.		Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	10	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	Country	Trust Fund Contribution	Added to Fees
<i>Z</i> (p	Country	Ζφ	30	This corporation has liability for Florida Statutes	intangible tax under s. 199.032, Yes No
24	25 g. Name and Address of Cu	29 Irrent Registered Agent	[30]	10. Name and Address of New R	
VAC	CHANOWSKI, GEORGE		B1 Nam		
5066 NW 90TH TERRACE			B2 Stre	82 Street Address (P.O. Box Number is Not Acceptable)	
CUP	RAL SPRINGS FL 33067		83	***************************************	
				(F-91-81-81-81-41-41-41-41-41-41-41-41-41-41-41-41-41	
			84 City		FL 85 Zip Code
11 Flore rant	to the provisions of Sections 607	0502 and 607 1508. Florida 9	tatutes the above-name	ed corporation submits this statement for the	
office or i	registered agent, or both, in the S	State of Florida. Such change	vas authorized by the c	ed corporation submits this statement for the orporation's board of directors. I hereby acce	pt the appointment as registered
agent La	em familiar with, and accept the o	bligations of, Section 607.050	b, Florida Statutes.		
SIGNATURE	Signature, Upod or photod name of registere	Alexandrea I although the topic of the	INOTE Registered Agent signa	me row ired when reinstation	DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TIME	PD	DELETI		1	Change Addition
NAM:	KOCHANOWSKI, GEORGE		1.2 NAME		
STREET ADDRESS	5066 NW 90TH TERRACE		1.3 STREET ADDRES		
CITY - ST - ZIP	CORAL SPRINGS FL 33067	7	1.4 CITY-ST-ZIP		
101.6	COLVE OF THITOS I E GOOD	DELETE			Change Addition
NAME			2.2 NAME		-
STREET ADDRESS			2.3 STREET ADDRES		
			2. 4 CITY-ST-ZIP	3 	
CHTY+ST+ZIP TITLE		DELETE			Change Addition
NAME		End evere	3.2 NAME		
STREET AUORESS			3.3 STREET ADDRES		
				8	
CAY: ST: ZiP Title		D.DELET	3.4 CITY-ST-ZIP		Change Addition
		hand . w/c.t.c.) (4.2 NAME		Diango La inchito
NAME Charles associate			4.2 NAME 4.3 STREET ADDRES		
STREET ADORESS				5	
COLY-ST-ZIF TOTALE		DELET	4.4 CITY-ST-ZIP 5 1 TITLE		Change Addition
		First DECELL	52 NAME		C Sharipe D Addition
NAME			V = 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1,12
STHEFT ADDRESS			5 3 STREET ADDRES	° .	14/2/
Crl t · ST · ZiP		DELETI	54 CITY-ST-ZIP		Change Addition
TELE		Ott.til	1	40000210	COEA
NAME			62 NAME	40000216 -05/20/97010	フンニロエ 177(12)()
STREET ADDRESS			6.3 STREET ADDRES	s -05/20/31010	11177020
Citiy - ST - 7IP			6.4 CITY+ST-ZIP	***165.00	

14. I do 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 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