Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90060 017 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000025973

1. Corporation Name

PEOPLES	s outdoor advertising	, INC.							
Principal Place	e of Business	Mailing Address				L (BB) (SB) 110 (BI() BI() BB() BB() BB()	Matel (188) Milita (186)	(KODW 1111 (BP1	
234 GRAPEWOOD COURT MARCO ISLAND FL 33937 234 GRAPEWOOD COURT MARCO ISLAND FL 33937						DO NOT WRITE IN	THIS SPACE		
						3. Date Incorporated or Qualifed			
						03/25/1996		}	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Ap	plied For	
26						65-0657057	No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		_		5, Certificate of Status Desired	\$8.75		
22		27					Fee Re	· 	
City & State	e	City & State				6. Election Campaign Financing	\$5.00		
23		28		intry		Trust Fund Contribution	Added t	o rees	
Zip	Country	Zip	30	ariu y		This corporation owes the current ye Personal Property Tax.	ar≀intangible ∐Yes	□No	
24	9. Name and Address of Currer	29 Agent	30	ī		10. Name and Address of New Regist			
	5. Name and Address of Currer	it itogistored Agent		81	Name				
CHOOS, \$ \$				L					
15600 SW 288 ST STE 312				82	Street Add	dress (P.O. Box Number is Not Acceptable)]	
HOMESTEAD FL 33033				83					
				L		····			
				84	City		FL 85 Zip (Code	
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change w tions of, Section 607.0505	as authorize , Florida Sta	a by tutes	the corporat	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	appointment as re	gistered	
12.	Signature, typed or printed name of registered age	ID DIRECTORS	13.		nt signature requir	ADDITIONS/CHANGES TO OFFICE		ORS IN 12	
TITLE	PT DELETE			1.1 TITLE			☐ Change	☐ Addition	
NAME	- I		1.2 %	1.2 NAME					
STREET ADDRESS	·		1.3 5	1.3 STREET ADDRESS					
CITY-ST-ZIP				1.4 CITY-ST-ZIP					
TITLE				2.1 TITLE			Change	Addition	
NAME			2.21	2.2 NAME				}	
STREET ADDRESS	234 GRAPEWOOD CT		2.3 5	TREE	TADDRESS				
CITY-ST-ZIP				CITY-S	ST-ZIP				
TITLE		☐ DELET	E 3.1 T	TILE			☐ Change	☐ Addition	
NAME			3.21	IAME]]	
STREET ADDRESS			3.3 9	TREE	TADDRESS	·		ł	
CITY-ST-ZIP				CITY-S	ST-ZIP				
TITLE		C DELET	E 4.11	ΠLE			☐ Change	Addition	
NAME	•		4. 2	NAME					
STREET ADDRESS			4.3 9	TREE	TADDRESS				
CITY-ST-ZIP		<u> </u>		ITY-S	T-ZIP			The Char	
TITLE]	☐ DELET	■ ⁻	TTLE)		☐ Change	☐ Addition	
NAME				IAME					
STREET ADDRESS					TADDRESS				
CITY-ST-ZIP			5.4 (ITY-S	ST-ZIP				

14. I 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 at trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

941389-1773

☐ Change

Addition