## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 19, 2008 08:00 AN **DOCUMENT # P96000033080 Secretary of State** 1. Entity Name C.D. SIGNS CORP. Principal Place of Business Mailing Address 8595 NW 1ST LANE 8595 NW 1ST LANE MIAMI, FL 33126 MIAMI, FL 33126 CR2E034 (11/05) 02122008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0659435 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent COSEANO, DANIEL DO NOT WRITE **8595 NW 1ST LANE** MIAMI, FL 33126 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE COSEANO, DANIEL NAME 8595 NW 1ST LANE STREET ADDRESS 000000831661 02/27/08-80029-008 150.00 CITY-ST-ZIP MIAMI, FL 33126 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP TTLE IN THIS SPACE MAAGE STREET ADDRESS CITY-ST-ZIP MILE. NAME STREET ADDRESS CITY-ST-ZIP TITLE

**FILED** 

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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 other like empowered.

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: DANIEL COSEANO 2-14-08 305-889-0440