2008 FOR PROFIT CORPORATION FILED **ANNUAL REPORT** Feb 15, 2008 08:00 AM Secretary of State **DOCUMENT # P96000042937** 1. Entity Name DJ'S SIGNS & GRAPHICS, INC. Principal Place of Business Mailing Address P O BOX 1822 P 0 BOX 1822 APOPKA, FL 32703 APOPKA, FL 32703 02122008 CR2E034 (11/05) No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3374986 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JOHNSTON, DAVID DO NOT WRITE **1448 EDEN DR APOPKA, FL 32703** 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 9. Election Campaign Financing \$5.00 May Be 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 PDT TITLE JOHNSTON, DAVID NAME STREET ADDRESS 1448 EDEN DRIVE CMY-ST-ZIP APOPKA, FL 32703

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DO NOT WRITE IN THIS SPACE

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 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 other like empowered.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS

CITY-ST-ZIP

NAME
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SIGNATURE AND TYPEP OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

2-12-08

407-886-7188