

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000067580

Entity Name: ALTERNATE SIGNS INC.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

169 NW 36 ST  
MIAMI, FL 33127 US

## New Principal Place of Business:

7504 NW 55 ST  
MIAMI, FL 33166 US

## Current Mailing Address:

169 NW 36 ST  
MIAMI, FL 33127 US

## New Mailing Address:

7504 NW 55 ST  
MIAMI, FL 33166 US

FEI Number: 65-0690731

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ENRIQUEZ, JOSE D  
169 NW 36 ST  
MIAMI, FL 33127 US

## Name and Address of New Registered Agent:

ENRIQUEZ, JOSE D  
7504 NW 55 ST  
MIAMI, FL 33166 US

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.

SIGNATURE: JOSE ENRIQUEZ

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: POSADA, ANTONIO  
Address: 169 NW 36 ST  
City-St-Zip: MIAMI, FL 33127 US

Title: VD (X) Delete  
Name: TORRES, KATIUSHKA  
Address: 169 NW 36 ST  
City-St-Zip: MIAMI, FL 33127 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: POSADA, ANTONIO  
Address: 7504 NW 55 ST  
City-St-Zip: MIAMI, FL 33166 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTONIO POSADA

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date