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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000031720 (0)

TEE SIGN DESIGN, INC.

FILED May 04 1998 8:00am Secretary of State

Principal Place of Business Mailing Address							
1605 N. HERCULES AVE. CLEARWATER FL 34615			1805 N. HERCULES AVE. CLEARWATER FL 34615				
							DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified 04/08/1997
2. Principal P	lace of Business	2s. M	lailing Address				4. FEI Number Applied For
21 26			,				59-343905 Not Applicable
Suite, Apt. #, etc			Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional
27							Fee Required
City & State	e	<u>├</u> ¬	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country 7ip Cou			ntry		8. This corporation owes or has paid the current year Intangible	
24 3 37	3 3765 26 29 33765 30		30			Personal Property Tax due June 30. X Yes No	
g, Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent
FOX, GREGORY A					81	Name	
28050 US HWY. 19 N., STE. 100 CLEARWATER FL 34821					82	Street Add	ress (P.O. Box Number is Not Acceptable)
					83		
					-		
					84	City	85 Zip Code
11. Pursuant	to the provisions of Sec	tions 607.0502 and 607.	1508, Florida Stat	utes, the at	OVE	-named corr	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes.							
SIGNATURE							
SIGNATURE		e of registered agent and life if a		OTE Registered	Age	nt signature requi	red when reinstating) DATE
12.		FFICERS AND DIRECTO		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPT	-A ID	DELETE	1.1 7(7			☐ Change ☐ Addition
NAME	Franek, Charle 1605 N. Herculi	:5 JH.		1.2 NA			
STREET ADDRESS	CLEARWATER FL					ADDRESS	
CITY-ST-ZIP TITLE	DSV	34013	DELETE	1.4 CI	_	[-ZIP	Change Addition
NAME	RIESTERER, PAU		E DECENE	2.1 III		1	E Simile E Section
STREET ADDRESS	1605 N. HERCULI					ADDRESS	
CITY-ST-ZIP	CLEARWATER FL			2. 4 C			
TITLE			DELETE	3.1 Tri			Change Addition
NAME				3.2 NA	ME		
STREET ADDRESS				3.3 ST	REET	address	,
CITY-ST-ZIP				3.4. CI		T-21P	
TITLE			☐ DELETE	4.1 107			Change Addition
NAME				4. 2 N/		-	
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP			DELETE	44 CH		r-ZIP	☐ Change ☐ Addition
FITLE			☐ DEFER	5 1 TIT		ļ	☐ Change ☐ Addition
NAME CIDITI ADDOCCO				5.2 NA		ADDOLOG	
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP TITLE			DELETE	5.4 CIT 6.1 TIT		- ZIF	Change Addition
NAME			- Percent	6.2 NA			
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP				6.4 CIT			

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 roport 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Charle

Trample

CHARLES FRANKE TO 2-1-9

813-447-4684