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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # **P97000055785**1. Corporation Name

GILLIS SIGNATURE IMPORTS CO.

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90074 027 ***150.00



Principal Place	e of Business	Mailing Address				i camirant fill inter contradite son.	1 00 111 00 301 01101 01111	.0801 10191 0111 1001
645 E. ATLANTI	IC AVE.	645 E. ATLANTIC AVE.						
DELRAY BEACH		DELRAY BEACH FL 33483				DO NOT WIDIT	E IN THIS SOACE	
					-		E IN THIS SPACE	
					- 1	3. Date Incorporated or Qualifed		ļ
		1 a 44 0' 4 4 do-				06/23/1997 4. FEI Number		Applied For
¬ '	lace of Business	2a. Mailing Address				65-0765485	H	Not Applicable
1		Suite, Apt. #, etc.				05 0705465	\$8.7	5 Additional
Suite, Apt.	#, etc.				- 1	5. Certifcate of Status Desired	T	e Required
City 9 Ctat		City & State				6. Election Campaign Financing	\$5	00 May Be
City & State	e	28				Trust Fund Contribution		ded to Fees
Zip	Country	Zip	Соц	intry		8. This corporation owes the curre	nt vear Intangible	
¬ '	25		10	,		Personal Property Tax.	Yes	□No
4	9. Name and Address of Current		<u> </u>			10. Name and Address of New Ro	egistered Agent	
				81 Name		•		
WER	RBER, RICHARD MR.			00 Ct	A d d	(D.O. Boy Number is Not Assental		
851	Broken Sound Parkway			82 Street	Address	(P.O. Box Number is Not Acceptate SOKEN SOUN	D PARK	WAY
80C	A RATON FL 33487			83	• ~	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<u> </u>	
					_			7:- 0-4-
				84 City	JOC A	- RATON	FL 85	Zip Code 3 3 4 8 7
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of im familiar with, and accept the obligat	of Florida. Such change was aut	thorized	d by the corp	corpora oration's	tion submits this statement for the p board of directors. I hereby accept	тие арропипели	g its registered is registered
DIGITATIONE	Signature, typed or printed name of registered agent		<u> </u>	Agent signature r	required wh		DATE	07000 111 40
12.	OFFICERS ANI		13.	<u> </u>	-	ADDITIONS/CHANGES TO OFF		
TITLE	P	☐ DELETE	1,1 TI		P	A + T = 0	Cha	nge
NAME	DESANTIS, C.		1.2 N	AME	DE 5	BROKEN SOUND	PARKWAY	l
STREET ADDRESS			1.3 ST	TREET ADDRESS	6111	DROKEN SOONE	131/07	
CITY-ST-ZIP	BOCA RATON FL 33487		-	ITY-ST-ZIP	Doc	A RATON, FC =	134 87 ⊠ Cha	nge
TITLE	S	, DELETE	2.1 TF					nge Addation
NAME	TERREAULT, NANCY		2.2 N	AME	TE	ZIZEAULT, NANC	T_# 22.4	
STREET ADDRESS			2.3 S	TREET ADDRESS	1			,
CITY-ST-ZIP	PARKLAND FL 33067				620	REAULT, NANCO LAVERS CIRCLE	7221	,
TITLE	1		_	CITY-ST-ZIP	620 DE	LAVERS CIRCLE LRAY BEACH, F	L 3344	F □ Addition
NAME		☐ DELETE	3.1 Tí	TLE	620 DE	LAVERS CIRCLE	- 3344 □ Cha	F Inge ☐ Addition
STREET ADDRESS		☐ DELETE	_	TLE	DE DE	LAVERS CIRCLE	L 3344	F nge ☐ Addition
CITY-ST-ZIP		☐ DELETE	3.1 Ti 3.2 N	TLE	DE	LAVERS CIRCLE	L 3344	F nge ☐ Addition
			3.1 TT 3.2 NV 3.3 ST	ITLE AME	DE	LAVERS CIRCLE	L 33442 ☐ Cha	nge Addition
TITLE		☐ DELETE	3.1 TT 3.2 NV 3.3 ST	ITLE AME TREET ADDRESS CITY-ST-ZIP	DE	LAVERS CIRCLE	L 3344	nge Addition
TITLE NAME			3.1 Ti 3.2 Nv 3.3 ST 3.4. C	ITLE AME TREET ADDRESS XITY-ST-ZIP ITLE	DE	LAVERS CIRCLE	L 33442 ☐ Cha	nge Addition
			3.1 TT 3.2 N/ 3.3 ST 3.4. C 4.1 TT 4. 2 N	ITLE AME TREET ADDRESS XITY-ST-ZIP ITLE	DE	LAVERS CIRCLE	L 33442 ☐ Cha	nge Addition
NAME		☐ DELETE	3.1 TT 3.2 NV 3.3 ST 3.4, C 4.1 TT 4, 2 N 4.3 ST 4.4 CC	ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE VAME TREET ADDRESS ITY-ST-ZIP	DE	LAVERS CIRCLE	<u> </u>	inge Addition
NAME STREET ADDRESS			3.1 TT 3.2 NV 3.3 ST 3.4 CC 4.1 TT 4.2 N 4.3 ST 4.4 CC 5.1 TT	ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE VAME TREET ADDRESS ITY-ST-ZIP ITLE	DE	LAVERS CIRCLE	L 33442 ☐ Cha	inge Addition
NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.1 TI 3.2 NV 33 ST 3.4. C 4.1 TI 4.2 N 4.3 S 4.4 CI 5.1 TI 5.2 NV	TITLE AME TREET ADDRESS CITY-ST-ZIP TITLE VAME TREET ADDRESS CITY-ST-ZIP TITLE AME	DE	LAVERS CIRCLE	<u> </u>	inge Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	3.1 TI 3.2 NJ 3.3 ST 3.4, C 4.1 TI 4.2 N 4.3 ST 4.4 CI 5.1 TI 5.2 NJ 5.3 ST	TITLE AME TREET ADDRESS CITY-ST-ZIP TITLE VAME TREET ADDRESS SITY-ST-ZIP TITLE AME TREET ADDRESS	DE	LAVERS CIRCLE	<u> </u>	inge Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	3.1 Ti 3.2 Nv 33 ST 3.4. C 4.1 Ti 4.2 N 4.3 S' 4.4 Ci 5.1 Ti 5.2 Nv 5.3 ST 5.4 Ci	TITLE AME TREET ADDRESS CITY-ST-ZIP TITLE VAME TREET ADDRESS CITY-ST-ZIP TITLE AME TREET ADDRESS TY-ST-ZIP	DE	LAVERS CIRCLE	3344 Cha	ange Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	3.1 TT 3.2 NV 3.3 ST 3.4 CC 4.1 TT 4.2 N 4.3 S 4.4 CC 5.1 TT 5.2 NV 5.3 ST 5.4 CC 6.1 TT	TITLE AME TREET ADDRESS CITY-ST-ZIP TITLE VAME TREET ADDRESS CITY-ST-ZIP TITLE AME TREET ADDRESS CITY-ST-ZIP TITLE TREET ADDRESS CITY-ST-ZIP TITLE	DE	LAVERS CIRCLE	3344 Cha	inge Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.1 TT 3.2 N/ 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 S' 4.4 CC 5.1 TT 5.2 N/ 5.3 ST 5.4 CC 6.1 TT 6.2 N/	TITLE AME TREET ADDRESS CITY-ST-ZIP TITLE AME TREET ADDRESS ATY-ST-ZIP TITLE AME TREET ADDRESS AME TREET ADDRESS AME TREET ADDRESS AME AME AME AME AME AME AME	DE	LAVERS CIRCLE	3344 Cha	ange Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	3.1 TT 3.2 N/ 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 S' 4.4 CC 5.1 TT 5.2 N/ 5.3 ST 5.4 CC 6.1 TT 6.2 N/	TITLE AME TREET ADDRESS CITY-ST-ZIP TITLE VAME TREET ADDRESS CITY-ST-ZIP TITLE AME TREET ADDRESS CITY-ST-ZIP TITLE TREET ADDRESS CITY-ST-ZIP TITLE	DE	LAVERS CIRCLE	3344 Cha	ange Addition

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 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, with all other like empowered.

SIGNATURE: