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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

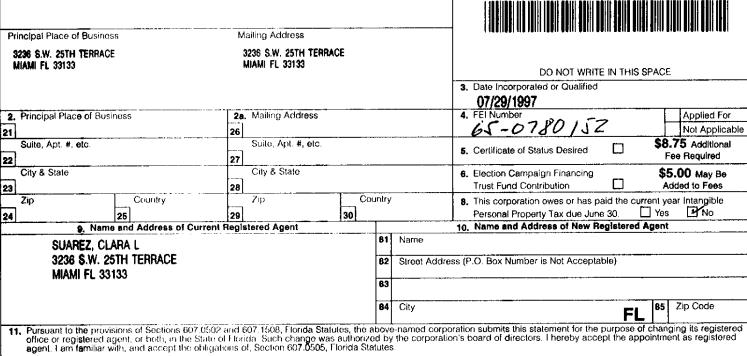
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000065440 (4)

TOO MUCH FOR LESS SIGNS AND GRAPHICS, INC.

Mailing Address Principal Place of Business 3236 S.W. 25TH TERRACE 3236 S.W. 25TH TERRACE MIAMI FL 33133 MIAMI FL 33133

FILED May 27 1998 8:00am Secretary of State



Signature, typed or printed name of registered agent and title diapple ob in (NOT) Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 TITLE TITLE PD NAME SUAREZ, CLARA L 1.2 NAME 3236 S.W. 25TH TERRACE STREET ADDRESS 1.3 STREET ADORESS MIAMI FL 33133 1.4 CITY - ST - ZIP CITY-ST-ZIF Addition DELETE Change 2.1 IITLE TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 31 TITLE TITLE NAME 3.2 NAME 3 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DFLETE 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - S1 - ZIP Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

14. Thereby 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.