2007 FOR PROFIT CORPORATION

ANNUAL REPORT Secretary of State DOCUMENT # P97000067807 1. Entity Name THE GREAT AMERICAN SIGN COMPANY Principal Place of Business · · · · · Mailing Address 2088 N HAVERHILL RD 2088 N HAVERHILL RD WEST PALM BCH, FL (33417", US-WEST PALM BCH, FL 33417 No Chg-P CR2E034 (11/05) 03062007 DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 65-0775393 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CARTER, DANNY DO NOT WRITE 6660 COUNTRY PL. RD WEST PALM BEACH, FL 33411 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, typed or printed name of registered agent and little il applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE CARTER, DANNY NAME STREET ADDRESS 6660 COUNTRY PL. RD. WEST PALM BEACH, FL 33411 CITY-ST-ZIP U00000666736 03/26/07-80003-010 150.00 CARTER, DEBE NAME STREET ADDRESS 6660 COUNTRY PLACE RD CITY-ST-ZIP WEST PALM BEACH, FL 33411 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME

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 eceiver 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:

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

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR