

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

FILED  
May 12 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 1997000069324  
1. Corporation Name  
SIGN ON, INC.

Principal Place of Business  
17003 AMBER LAKE CT.  
LUTZ, FL 33549

Mailing Address  
SAME

2. Principal Place of Business  
21 17003 AMBER LAKE CT.  
Suite, Apt. #, etc.  
22 LUTZ, FL  
City & State  
23 33549  
Zip  
24 USA  
Country

2a. Mailing Address  
26 SAME  
Suite, Apt. #, etc.  
27 LUTZ, FL  
City & State  
28 33549  
Zip  
29 USA  
Country

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
8-11-97

4. FEI Number  
59-3466983

5. Certificate of Status Desired  
\$8.75 Additional Fee Required

6. Election Campaign Financing  
Trust Fund Contribution  
\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  
Yes No

9. Name and Address of Current Registered Agent  
RICHARD D. JENSEN  
17003 AMBER LAKE CT.  
LUTZ, FL 33549

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
FL 85 Zip Code

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  
4-27-98

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PRESIDENT	RICHARD D. JENSEN	17003 AMBER LAKE CT.	LUTZ, FL 33549	<input type="checkbox"/>
SECRETARY	DONNA A. JENSEN	17003 AMBER LAKE CT.	LUTZ, FL 33549	<input type="checkbox"/>
TREASURER	DANIEL W. JENSEN	7064 COUNTY ROAD 6	MAPLE PLAIN, MN 55359	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

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\*\*\*150.00

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.

SIGNATURE: 4-27-98 813/948-7671

CR2E034 (10/97)