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

**PROFIT** CORPORATION ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000098209 (4)

SIGCO SIGNS AND SIGNALS, INC.

## **FILED** Feb 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					i tabiradı ile ibrit ibəti obiri darili dari	in ihidi föllö lihit sa	isia imis 1861
799 BENNETT ROAD LONGWOOD FL 32752		799 BENNETT ROAD LONGWOOD FL 32752			DO NOT WRITE IN T	'HIS SPACE	
					3. Date Incorporated or Qualified 11/17/1997		
2. Principal Place of Business 2a. Mailing Address					4, FEI Number	V   A	pplied For
21 26							ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional
22						Fee Re	equired
City & Stat	State City & State				Election Campaign Financing     Trust Fund Contribution		May Be to Fees
Zip	Country	Zφ	Cour	ntry	8. This corporation owes or has paid the	e current year Inf	tangible
24	25		30		Personal Property Tax due June 30.		□ No
	g. Name and Address of Curren	t Registered Agent		81 Name	10. Name and Address of New Registe	red Agent	
	ALIN, LAWRENCE J	Λ.	Į	Name			
225 EAST ROBINSON ST., STE. 600				82 Street Addr	ress (P.O. Box Number is Not Acceptable)		
LANDMARK II CENTER ORLANDO FL 32801				83			
ļ	D44D0 1 L 02001		ļ				
				84 City		FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607,1508, Florida Statute	es, the ab	ove-named corp	poration submits this statement for the purpo	se of changing if	ts registered
office or r	egistered agent, or both, in the Static in familiar with, and accept the oblig-	of Florida. Such change was a itions of, Section 607.0505, Flo	uthorized rida Statu	l by the corporat ites.	tion's board of directors. I hereby accept the	appointment as	registered
SIGNATURE							ļ
	Signature, typical or proceed name, of rog storied any			Agent signature requir		ATE	
12.	OFFICERS AND	D DIRECTORS  DEETE	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR  Change	RS IN 12
TITLE	GOLDMAN, S.I.	□ ottetit	1,1 1(1)	<b>1</b>		L. Citaliye	L.J ADDITION
STREET ADDRESS	799 BENNETT ROAD		1.2 NA	REET ADDRESS			}
CITY-ST-ZIP	LONGWOOD FL 32752			Y - ST - ZIP			ľ
TITLE	D	DELETE	2.1 TIT			☐ Change	Addition
NAME	GOLDMAN, MARILYN S		2 2 NAI	1			
STREET ADDRESS	799 BENNETT ROAD		2 3 STF	HEET ADDRESS			ì
CITY-ST-ZIP	LONGWOOD FL 32752		2. 4 DC	ry - ST - ZIP			
TITLE	D	☐ DELETE	3.1 TIT	LÉ		☐ Change	Addition
NAME	BURKETT, J. RONALD		3.2 NA	ME			Į
STREET ADDRESS	799 BENNETT ROAD		3.3 STF	REET ADDRESS			į
CITY-ST-ZIP	LONGWOOD FL 32752	7 60 646	_	Y-ST-71P			1 32200-
TITLE		☐ DELETE	4.1 [][	ł		☐ Change	☐ Addition
NAME			4. 2 NA				Į.
STREET ADDRESS				IEET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.1 TIT	Y-ST-ZIP		Change	Addition
NAME			5 2 NA				
STREET ADORESS				REET ADDRESS			\ 
CITY-ST-ZIP				Y-ST-ZIP			ŕ
TITLE		DELETE	6 1 T)T			☐ Change	Addition
NAME			6 2 NAI			Ť	
STREET ADDRESS		_	6.3 STF	IEF1 ADDRESS			ŧ
CITY-ST-ZIP		1	6.4 CIT	Y-ST-ZIP			

 14. Thereby certify that the informatic indicated on this annual report or officer or director of the corporal Block 12 or Block 13 if changed. ling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an rusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

2/5/98

1-407-830-5000