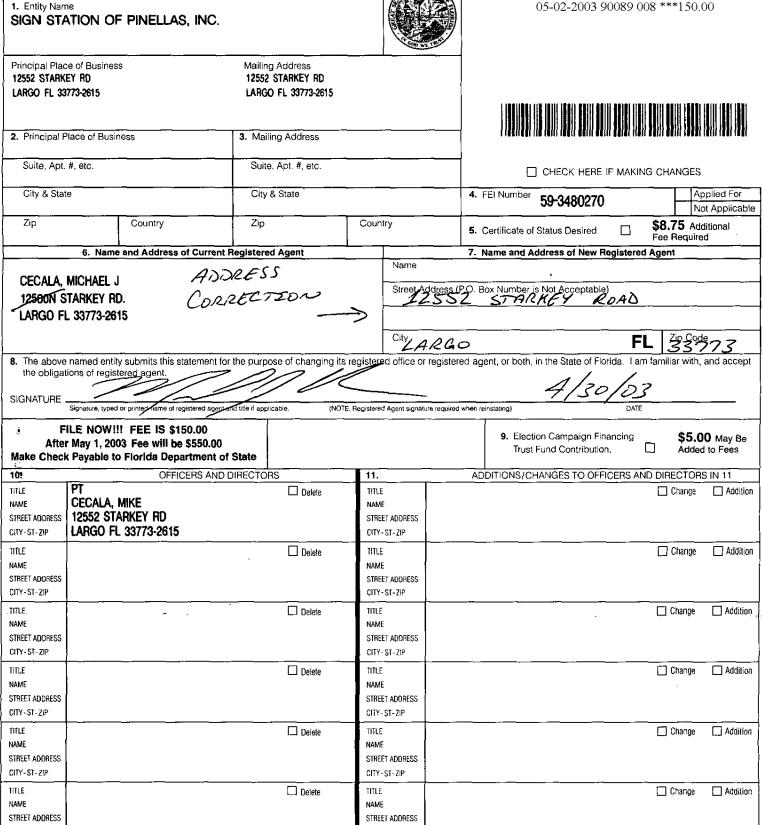
2003 FOR PROFIT CORPORAT



May 02, 2003 8:00 am Secretary of State 05-02-2003 90089 008 ***150.00

FILED

OHITORIN	DUSINESS REPUNI	(ODD)
DOCUMENT # 1. Entity Name SIGN STATION OF PI	P97000100787 NELLAS, INC.	
Principal Place of Business	Mailing Address	



12. 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 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 receiver 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

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR