...2004 FOR PROFIT CORPORATION ANNUAL REPORT

NAME
STREET ADDRESS
CTTY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CTTY-ST-ZIP

ANNUAL REPORT Apr 30, 2004 08:00 AM Secretary of State **DOCUMENT # P98000049349** H & B OUTDOOR ADVERTISING, INC. Principal Place of Business Mailing Address 1939 SHERWOOD STREET 1939 SHERWOOD STREET CLEARWATER, FL 33765 CLEARWATER, FL 33765 01052004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3516809 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent EVANS, H. MICHAEL DO NOT WRITE 2123 N.E. COACHMAN ROAD SUITE A IN THIS SPACE CLEARWATER, FL 33765 1. 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 presed name of registered agent and sale if applicable. (NOTE: Registered Agent argnotuse required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Fil.E NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. IIII £ BATES, CHARLES A JR NAM 305 MORNINGSIDE STREET ADDRESS UQQQQQ142581 04/30/04-80058-002 150.00 CITY-ST-ZP PALM HARBOR, FL 34683 7111 NAME BATES, JOHN C STREET ADDRESS 1936 ALTON DRIVE CITY-ST-ZIP CLEARWATER, FL 33763 HILE NAME HANSON, RANDY J 18851 PASADENA LANE STREET ADORESS DO NOT WRITE CHY-SI-ZP SPRING HILL, FL 34610 TIRE IN THIS SPACE MARK STREET ABBRESS CITY-ST-ZIP THE E

FILED

12. I hereby certify that the information supplied with this filling 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, Plorida 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: SIGNATURE AND TYPED ON PRINTED NAME OF BIGNING OFFICER ON DIRECTOR Date Deglared Floors &