## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # 1. Corporation Name DA'SIGNS, INC. Principal Place of Business Mailing Address 2550 N. FEDERAL HWY. 2550 N. FEDERAL HWY. SUITE 7 SUITE 7 FT. LAUDERDALE FL 33305 FT. LAUDERDALE FL 33305 3. Date Incorporated or Qualified 3a. Date of Last Report 01/16/1991 06/29/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0240546 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zio Country 8. This corporation has liability for intangible tax under s. 199,032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MARTINO, DAVID 82 Street Address (P.O. Box Number is Not Acceptable) 2550 N. FEDERAL HWY. **SUITE 7** 83 FT. LAUDERDALE FL 33305 84 City 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 Signature, 157-ed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when remstating) 12. OFFICERS AND DIRECTORS CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1 1 TITLE Change Addition NAME MARTINO, DAVID 1.2 NAME 2550 N. FEDERAL HWY., STE. 7 STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33305 CITY-ST-ZIP 1.4 CITY- ST - 715 TITLE DELETE 2 1 IIII F Change Addition NAME 2.2 NAME STREEL ADDRESS 2.3 STREET ADDRESS CITY - \$1 - ZIF 24 CHY-ST-ZIP THLE [] DELETE 3 1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-7IP 3.4 CITY - \$1 - 7IP TITLE DELETE 4. 1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - S1 - ZIF THE [ ] DELETE 5.1 TITLE Addition Change NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** 011Y-S1-2IP 5 4 CITY - ST - ZIP TITLE DELETE 6. 1 TITLE [] Change Addition NAME 6.2 NAME STREET ADDRESS **6.9 STREET ADDRESS** CITY - ST- ZIP 6.4 CITY~ST-21P 14. I do hereby certify that the information supplied with this filing is volunterly furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or explainmental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empoweres to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 43 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED ON PROVIDED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/96 954-566-3856