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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # \$80246

(9)

RAPID CUSTOM SIGNS, INC.

Principal Place of Business

7820 N.W. 103 STREET HIALEAH GARDENS FL 33016 Mailing Address

7920 N.W. 103 STREET

HIALEAH GARDENS FL 33016-2452

## **FILED** May 02 1997 8:00am Secretary of State

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L				:	<ol> <li>Date Incorporated or Qualified</li> <li>09/18/1991</li> </ol>	3a. Date o		∌port	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4, FEI Number		Applied For		
21		26		65-0288190	Not Applicable				
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & State		City & State		Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees			
Ζιρ	Country	Zip	h	intry	8. This corporation has liability for		under s.		
24	25	[29]	30			Yes 1			
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Re	gistered Age	int		
	QUEZ, MIGUEL A.			81 Name					
ROBERTO CURBELO				82 Street Add	Street Address (P.O. Box Number is Not Acceptable)				
	0 n.w. 103 street Leah gardens FL 33016			83					
				84 City		F-0   E	35 Zip 0	Code	
					1,2,2,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1	FL [			
11. Pursuant office or sagent. La	to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the oblig	02 and 607.1508, Florida Stalle of Florida. Such change was gations of, Section 607.0505.	tutes, the a is authorize Florida Sta	bove-named cor d by the corpora tutes.	poration submits this statement for the patient's board of directors. I hereby acception's	urpose of chat the appoint	anging its iment as i	s registered registered	
SIGNATURE	Signature Typed or proced harrie of registered as	gent and little if applicable	VOTE: Redistere	d Agent signature requ	ulted when reinstating)	DATE	7/		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DI	RECTOR	S IN 12	
TIILE	D	DELETE	1,1 7	TLE			Change	Additio	
NAME	VAZQUEZ, MIGUEL A.		1.2 N	AME					
STREET ADDRESS	7920 N.W. 103 ST.		1.3 \$	TREET ADDRESS					
CHY-S1-ZIP	HIALEAH GDNS. FL		1.4 0	ITY-ST-ZIP					
TITLE	D	DELETE	2.1 T	ITLE	-		Change	Additio	
NAME	CURBELO, ROBERTO		2.2 N	AME					
STREET ADORESS	7920 N.W. 103 ST.		2.3 S	TREET ADDRESS					
CITY - ST - ZIF	HIALEAH GONS. FL		2.46	CHTY-ST-ZIP					
TILLE		DELETE	31T				Change	Additio	
NAME	}		32 N	AME	•				
STREET ADDRESS			3.3 \$	TREET ADDRESS					
CHTY - S1 - ZiP				CITY-ST-ZIP					
10 E		DELETE	4.1 T	· · · · · · · · · · · · · · · · · · ·			Change	Addition	
NAME	1		4.21	iame					
STREET ADDRESS				TAEET ADDRESS					
CiTY-ST-ZiP				ITY-ST-ZIP					
11111		DELETE	5.1 T	ITLE			Change	Additio	
NAME	1		5.2 N	AME					
STREET LADORESS			5.3 S	TREET ADDRESS					
CITY - ST - ZIF	1		5.4 0	ITY-ST-ZIP					
TITLE		DELETE	6.1 T				Change	Additio	
NAME	1	book a company	62 N	I .					
STREET ADDRESS				TREET ADDRESS					
CHY-S1-7IP				ITY-ST-ZIP					
Ontralian.	1		0.4 6	11173174F					

14. I do 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: