

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

FILED

Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # V05119 (5)
1. Corporation Name
AFFORDABLE DISPLAYS, INC.



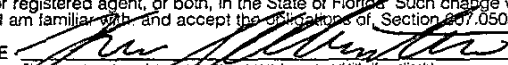
Principal Place of Business 2030 CALUMET ST SUITE 202 CLEARWATER FL 34625 US	Mailing Address 2030 CALUMET ST SUITE 202 CLEARWATER FL 34625 US
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 33765 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 33765 Country		3. Date Incorporated or Qualified 01/06/1992	4. FEI Number 59-3100408	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		6. Election Campaign Financing Trust Fund Contribution ☐		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No		\$8.75 Additional Fee Required \$5.00 May Be Added to Fees

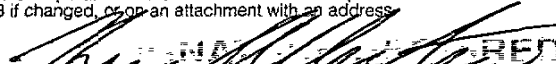
9. Name and Address of Current Registered Agent ALBURTUS, KENNETH 15251 ROOSEVELT BLVD SUITE 202 CLEARWATER FL 34620				10. Name and Address of New Registered Agent 81 Name Alburtus, Kenneth 82 Street Address (P.O. Box Number is Not Acceptable) 2030 Calumet St. 83 84 City Clearwater FL 85 Zip Code 33765		
--	--	--	--	--	--	--

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  DATE 2-2-98
(NOTE: Registered Agent signature required when reinstalling)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	☐ Change ☐ Addition
NAME	BLANCHETTE, ROBERTA L	1.2 NAME	
STREET ADDRESS	2270 LAGOON DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL	1.4 CITY-ST-ZIP	
TITLE	VPST	2.1 TITLE	☐ Change ☐ Addition
NAME	ALBURTUS, KENNETH A	2.2 NAME	
STREET ADDRESS	2270 LAGOON DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL	2.4 CITY-ST-ZIP	
TITLE	VP	3.1 TITLE	☐ Change ☐ Addition
NAME	BLANCHETTE, TERESA	3.2 NAME	
STREET ADDRESS	3034 EASTLAND BLVD D-109	3.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 34621	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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, on an attachment with an address.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-2-98 (21) 443-3469
Date Daytime Phone # 0402016

CR2E034 (10/97)