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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90100 031 ***150.00

DOCUMENT # G35648

1. Corporation Name

SUPER MOM, INC.	
Principal Place of Business	Mailing Address
22387 THOUSAND PINES LANE	22387 THOUSAND PIL

22387 THOUSAND PINES LANE 22387 THOUSAND PINES LANE BOCA RATON FL 33428 BOCA RATON FL 33428			DO NOT WRITE IN TH	IS SPACE
			3. Date Incorporated or Qualifed 04/25/1983	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
	26		59-2506471	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 24 25	Zip . Co	untry	This corporation owes the current year I Personal Property Tax.	ntangible
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
SUTHERLAND, RICHARD A.		81 Name		-th-
22387 THOUSAND PINES LANE		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
BOCA RATON FL 33428		83	•	
		84 City	F	
11. Pursuant to the provisions of Sections 607.05	i02 and 607.1508, Florida Statutes, the	above-named corp	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its registered ointment as registered

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

		•				
SIGNATURE	Signature, typed or printed name of registered agent and title if a	nolicable (NOTE: R	tegistered Agent signature require	d when reinstating)	DATE	
12.	OFFICERS AND DIREC	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	VSD	☐ DELETE	1,1 TITLE		☐ Change	☐ Addition
NAME !	SUTHERLAND, RICHARD A.		1.2 NAME			
STREET ADDRESS	22387 THOUSAND PINES LN		1.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON,F L		1.4 CITY-ST-ZIP	·		}
TITLE	PTD	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME	SUTHERLAND, JUDITH L.		2.2 NAME		•	
STREET ADDRESS	22387 THOUSAND PINES LN		2.3 STREET ADDRESS		eren eren eren eren eren eren eren eren	[
CITY-ST-ZIP	BOCA RATON FL		2.4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE	•	☐ Change	☐ Addition
NAME	,		3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		·	
CfTY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4, 2 NAME			-
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE	•	☐ DELETE	5.1 TITLE		☐ Change	☐ Addition (
NAME			5.2 NAME	•		
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS	•		6.3 STREET ADDRESS	•		
	,		CA OTDA ČT. ZID			

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, or on an attachment with an address, with all other like empowered.