

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000643

FILED
Apr 27, 2006
Secretary of State

Entity Name: SUPERIOR GARDENS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

444 BRICKELL AVE.
SUITE 210
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

444 BRICKELL AVE.
SUITE 210
MIAMI, FL 33131

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SINISTERRA, TOMAS B
444 BRICKELL AVE.
SUITE 210
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: SINISTERRA, TOMAS B
Address: 444 BRICKELL AVE., SUITE 210
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: SINISTERRA, TOMAS B
Address: 444 BRICKELL AVE., SUITE 210
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: RODRIGUEZ, CARLOS
Address: 444 BRICKELL AVE., SUITE 210
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: RODRIGUEZ, OSCAR
Address: 444 BRICKELL AVE., SUITE 210
City-St-Zip: MIAMI, FL 33131

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KNIGHT, KEN
Address: 2253 N.W. 136 TERRACE
City-St-Zip: OPA LOCKA, FL 33054

Title: S (X) Change () Addition
Name: CAREY, BEULAH
Address: 2232 N.W. 135 TERRACE
City-St-Zip: OPA LOCKA, FL 33154

Title: T (X) Change () Addition
Name: NEALY, FELICIA
Address: 2296 N.W. 136 TERRACE
City-St-Zip: OPA LOCKA, FL 33149

Title: D (X) Change () Addition
Name: MOSS, SABINE
Address: 2231 N.W. 135 TERRACE
City-St-Zip: OPA LOCKA, FL 33149

Title: D () Change (X) Addition
Name: CAREY, MARLON
Address: 2232 N.W. 135 TERRACE
City-St-Zip: OPA LOCKA, FL 33054

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KNIGHT KEN

P

04/27/2006

Electronic Signature of Signing Officer or Director

Date