

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000643

FILED
Apr 22, 2009
Secretary of State

Entity Name: SUPERIOR GARDENS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2296 NW 136TH TERRACE
OPA LOCKA, FL 33154 US

New Principal Place of Business:

918 OCEAN DRIVE
207
MIAMI BEACH, FL 33139 US

Current Mailing Address:

918 OCEAN DRIVE #207
MIAMI BEACH, FL 33139 US

New Mailing Address:

FEI Number: 20-2825988 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EUROPEAN AMERICAN REAL ESTATE INC.
918 OCEAN DRIVE #207
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

CUEVAS & ORTIZ, P.A.
536 BILTMORE WAY
CORAL GABLES, FL 33134 US

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: ANDREW CUEVAS

04/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NEALY, FELICIA
Address: 11616 SW 19 STREET
City-St-Zip: MIRAMAR, FL 33025

Title: S () Delete
Name: BOCAILLE, EDIANE
Address: 2266 NW 136 TERRACE
City-St-Zip: OPA LOCKA, FL 33054

Title: T () Delete
Name: ROSERO, TAIRO
Address: 2289 NW 136 TERRACE
City-St-Zip: OPA LOCKA, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: ROSERO, JAIRO
Address: 2289 NW 136 TERRACE
City-St-Zip: OPA LOCKA, FL 33054

I hereby certify that the information supplied with this filing does not qualify 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: FELICIA NEALY

P

04/22/2009

Electronic Signature of Signing Officer or Director

Date