

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 91867 011 \*\*\*150.00

**FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000096823  
 1. Entity Name  
 SUPERIAIRE OXYGEN & EQUIPMENT, INC



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
 770 AIRPORT ROAD  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
 PANAMA CITY, FL

City & State

4. FEI Number 03-0490008 Applied For Not Applicable

Zip 32405 Country US Zip Country

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent  
 Name  
 TOLLIVER, LEANN  
 Street Address (P.O. Box Number is Not Acceptable)  
 770 AIRPORT ROAD  
 City PANAMA CITY FL 32405

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Leann Tolliver* DATE 4/29/03

January 1 - May 1 Fee is \$150.00  
 After May 1 Fee is \$550.00  
 Amended UBR is \$61.25  
 Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE P NAME TOLLIVER, LEANN STREET ADDRESS 770 AIRPORT ROAD CITY-ST-ZIP PANAMA CITY, FL 32405	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or on an attachment with an address with all other like empowered.

SIGNATURE: *Leann Tolliver* DATE 4/29/03

769 0080

CR2E034B (12/02)