FILED Sep 20, 1999 8:00 am Secretary of State

09-20-1999 90008 040 \*\*\*550.00

## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT <sup>2</sup> 1999

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000033047

## SUPERIOR WHOLESALE SUPPLY COMPANY

e or business						
SUITE 105		120 EAST OAKLAND PARK BLVD. SUITE 105 WILTON MANORS FL 33334		DO NOT WRITE IN THIS SPACE		
* <del>* *</del>				3. Date Incorporated or Qualified		
				04/11/1997		
lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
26				65-0743742	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
					· · · · · · · · · · · · · · · · · · ·	
re	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Country	Zip	Country	7	8. This corporation owes the current year		
25	29	30		Intangible Personal Property.	Yes No	
9. Name and Address of Curr	rent Registered Agent			10. Name and Address of New Registere	d Agent	
		81	Name			
KONCSOL, MARK RAYMOND 120 EAST OAKLAND PARK BLVD. SUITE 105 WILTON MANORS FL 33334		82	Street Addr	et Address (P.O. Box Number is Not Acceptable)		
		02		1.00		
		0.3	'			
LIGHT MANOROLL GOOD		84	City		85 Zip Code	
			<u> </u>			
registered agent, or both, in the Sta	ate of Florida. Such change was a	uthorized by	the corporation	ration submits this statement for the purpose of on's board of directors. I hereby accept the app	changing its registered pointment as registered	
ann laitiniai witti, and accept the ob	ingations of, section dor.oboo, inc		J.			
Signature, typed or printed name of registered a		TE: Registered A	Agent signature requ	uired when reinstating) DATE		
	agent and title if applicable. (NC					
OFFICERS	agent and title if applicable. (NC AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
OFFICERS D	<u> </u>					
	AND DIRECTORS  DELETE	13.			AND DIRECTORS IN 12	
D KONCSOL, MARK RAYMON	AND DIRECTORS  DELETE	13. 1.1 TITLE 1.2 NAME	T ADDRESS		AND DIRECTORS IN 12	
D KONCSOL, MARK RAYMON 120 EAST OAKLAND PARK	AND DIRECTORS  DELETE  D BLVD., SUITE 105	13. 1.1 TITLE 1.2 NAME			AND DIRECTORS IN 12	
D KONCSOL, MARK RAYMON	AND DIRECTORS  DELETE  D BLVD., SUITE 105	13. 1.1 TITLE 1.2 NAME 1.3 STREE			AND DIRECTORS IN 12	
D KONCSOL, MARK RAYMON 120 EAST OAKLAND PARK	AND DIRECTORS  DELETE  ID  BLVD., SUITE 105  4	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S			AND DIRECTORS IN 12 Change Addition	
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D KONCSOL, MARK RAYMON 120 EAST OAKLAND PARK	AND DIRECTORS  DELETE  ID  BLVD., SUITE 105  4	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	T-ZIP T ADDRESS		AND DIRECTORS IN 12 Change Addition	
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D KONCSOL, MARK RAYMON 120 EAST OAKLAND PARK	AND DIRECTORS  DELETE  ND SIGNATURE 105  4  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS		AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition	
	Country 25  9. Name and Address of Curr NCSOL, MARK RAYMOND DEAST OAKLAND PARK BLVD TE 105 TON MANORS FL 33334  to the provisions of sections 607.0 registered agent, or both, in the Stam familiar with, and accept the ob	SUITE 105 WILTON MANORS FL 333  lace of Business  #, etc.  City & State  28  Country  Zip  25  9. Name and Address of Current Registered Agent  NCSOL, MARK RAYMOND DEAST OAKLAND PARK BLVD.  ITE 105 TON MANORS FL 33334  to the provisions of sections 607.0502 and 607.1508, Florida Statute registered agent, or both, in the State of Florida. Such change was a tim familiar with, and accept the obligations of, section 607.0505, Florida Statute registered agent, or both, in the State of Florida. Such change was a tim familiar with, and accept the obligations of, section 607.0505, Florida Statute registered agent, or both, in the State of Florida. Such change was a tim familiar with, and accept the obligations of, section 607.0505, Florida Statute registered agent, or both, in the State of Florida. Such change was a time familiar with, and accept the obligations of, section 607.0505, Florida Statute.	SUITE 105 WILTON MANORS FL 33334  Place of Business  2a. Mailing Address 26  #, etc.  Suite, Apt. #, etc.  City & State 28  Country 25  9. Name and Address of Current Registered Agent  NCSOL, MARK RAYMOND DEAST OAKLAND PARK BLVD.  ITE 105  TON MANORS FL 33334  to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above registered agent, or both, in the State of Florida. Such change was authorized by am familiar with, and accept the obligations of, section 607.0505, Florida Statutes	SUITE 105 WILTON MANORS FL 33334  Place of Business  2a. Mailing Address 26  #, etc.  Suite, Apt. #, etc.  City & State  28  Country  25  P. Name and Address of Current Registered Agent  NCSOL, MARK RAYMOND DEAST OAKLAND PARK BLVD.  ITE 105  TON MANORS FL 33334  Red City  to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporegistered agent, or both, in the State of Florida. Such change was authorized by the corporation familiar with, and accept the obligations of, section 607.0505, Florida Statutes.	DO NOT WRITE IN THE 33334  SUITE 105 WILTON MANORS FL 33334  A Date Incorporated or Qualified O4/11/1997  Lace of Business  2a. Mailing Address 26  Suite, Apt. #, etc. 27  Country 2ip Country 25 29 30  Country 3. Date Incorporated or Qualified O4/11/1997  4. FEI Number 65-0743742  5. Certificate of Status Desired  City & State Country 28  Country 29 30  Country 30  Name and Address of Current Registered Agent  NAme  NCSOL, MARK RAYMOND DEAST OAKLAND PARK BLVD.  TE 105 TON MANORS FL 33334  Expression of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the applier familiar with, and accept the obligations of, section 607.0505, Florida Statutes.	

C!TY-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, or on an attachment with an address.

DELETE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE

9/14/99 954.564.9231