UNIFORM BUSINESS REPORT (UBR)				02 SEP 11 PM	1:16
DOCUN 1. Entity Name	MENT# superior meat co	U67895 MPANY, INC.	-	SECRETARY OF TALLAHASSEE. FL	
DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 2. Poincipal Place of Business 2. Poincipal Place of Business 2. Page 1. Poincipal Place of Business 2. Poincipal Place of Business 3. Mailing Address 2. Poincipal Place of Business 2. Poincipal Place of Business 3. Mailing Address 2. Poincipal Place of Business 3. Mailing Address 4. Poincipal Place of Business				5000077329659 -09/13/0201044018 *****61.25 *****61.25	
·		2789 Davie Boulevard Suite Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State Ft. Lauderdale, Florida		City & State Ft. Lauderdale, Florida		4. FEI Number 59-1575068	Applied For Not Applicable
Zip 333	12 Country USA	Zip 33312	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
a romania	and a deposit constitution		Name AN	7. Name and Address of Current Re	egistered Agent
			M. 32 S. I	DREW SZOKE, JR.	
The first During the first through the first that the first the first through the fi				(P.O. Box Number is Not Acceptable) avie Boulevard	
	「JIN THIS SP	ACESTA			7.6.4
ij degađajete Lagostalija		Albania (1965) Provincia de la Secola (1965)	City Ft. L	auderdale	FL Zip C3 3312
8. The above r	named entity submits this statement for	the purpose of changing its	s registered office or registe	ered agent, or both, in the State of Flori	da.
SIGNATURE _	Signature, typed or printed name of registered agent a		E: Registered Agent signature require	ed when reinstating)	DATE
Tax filing requirement and elects to do so. Arter May 1;			May 1: Fee is \$150.00 / 1: Fee is \$550.00 ed UBR is \$61:25 ble to Department of St		Added to Fees
11.	OFFICERS AND		Towns Comment		
TITLE NAME	President , Directo	or	IITLE NAME		
STREET ADDRESS	Andrew Szoke, 5200 N. Ocean Blvd		STREET ADDRESS		en e
CITY-ST-ZIP	Ft. Lauderdale, FL	33308	CITY-ST-ZIP		Straight of the Parish Est Series
TITLE NAME	Vice President , Director Gabriella Szoke		NAME		
STREET ADDRESS	5200 N.:Ocean Blyd. Ft. Lauderdale, FL 33308		STREET ADDRESS		
CITY-ST-ZIP	Second Vice President		TITLE TO SERVICE AND ASSESSMENT	file we find a belower	AND MARKET CONSIGNATION OF STREET
NAME	Sixto Mendez 5400 S.W. 163rd Avenue		NAME. STREET ADDRESS		ABITE
STREET ADDRESS CITY-ST-ZIP	Southwest Ranches, FL 33331		CITY-ST-ZIP.	DO NOT	
TITLE	Treasurer, Director		INTLE -	IN THIS S	SPACE
NAME STREET ADDRESS	Andrew Szoke, Jr. 5200 N. Ocean Blvd.		NAME STREET ADDRESS	Part de la Caración d	Valoria (IIII) kalendaria v
CITY-ST-ZIP	Ft. Lauderdale, FL 33308		- CITY-ST-ZIP		
1ITLE	Secretary; Director		TITLE NAME	roverske leteralise i ber	
NAME STREET ADDRESS			STREET ADDRESS* +	gantageriades (Section of Section)	
CITY-ST-ZIP	Ft. Lauderdale, FI	l.,			r visual Lives, Year A C A Live Y T W. Chiefe Y M. C Mark Y M. S. M. S
	rt. Dauderdate, Fr	l.,	CTY+ST-ZIP 6 2 2 2 2		
TITLE NAME	rt. Bauderdate, Fr	l.,	25 88 A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	rt. badderdate, ri	l.,	OTV-ST-ZIP TITE NAME STREET ADDRESS CITY-ST-ZIP		

13. Thereby 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

95(1-791-6633 Daytime Phone #

CR2E034B (12/01)