

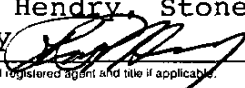
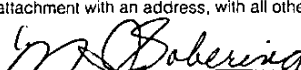


**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**



<b>DOCUMENT # F02000002492</b>				<b>Department of State</b>	
1. Entity Name <b>SUPERIOR CUSTOM VANS RI, INC.</b>		05-01-2006 90434 006 ***150.00			
Principal Place of Business <b>429 E. MAIN AVENUE WEST FARGO, ND 58078-1936</b>		Mailing Address <b>20 N ORANGE AVE STE 600 ORLANDO, FL 32801</b>			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02152006 Chg-P CR2E034 (11/05)	
City & State		City & State		4. FEI Number <b>45-0455026</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>CALANDRINO HENDRY, STONER, DELANCEY &amp; BROWN, P.A. 20 N. ORANGE AVENUE SUITE 600 ORLANDO, FL 32801</b>				7. Name and Address of New Registered Agent Name <b>Hendry, Stoner, Calandrino &amp; Brown, P.A.</b> Street Address (P.O. Box Number is Not Acceptable) <b>20 North Orange Avenue, Suite 600</b> City <b>Orlando</b> FL Zip Code <b>32801</b>	
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. <b>Hendry, Stoner, Calandrino &amp; Brown, P.A.</b> <b>Robert R. Hendry</b>  <b>Pres</b> <b>4/26/06</b> SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SOBERING, DONALD J 1575 DUGALD ROAD WINNIPEG MANITOBA CANADAR, R2JOH3 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST SOBERING, JOYCE A 1575 DUGALD ROAD WINNIPEG MANITOBA CANADAR, R2JOH3 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  <b>JOYCE SOBERING</b> <b>APR 24/06</b> <b>204-661-8525</b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

ATTACHMENT 20041821

LAW OFFICES OF #F02000002492  
**HENDRY, STONER, CALANDRINO & BROWN**

PROFESSIONAL ASSOCIATION

20 N. ORANGE AVENUE, SUITE 600

**ORLANDO, FLORIDA 32801**

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G. STEVEN BROWN  
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BOARD CERTIFIED IN TAXATION

LISA KRUEGER KHAN  
IMMIGRATION AND NATURALIZATION

JOHN G. DELANCETT  
COMMERCIAL AND TAX LITIGATION  
CERTIFIED CIRCUIT CIVIL MEDIATOR

MARCOS A. CIGAGNA  
ADMITTED IN BRAZIL ONLY

April 26, 2006

Division of Corporations  
Uniform Business Report  
P. O. Box 1500  
Tallahassee, Florida 32302-1500

Re: 2006 Annual Business Reports

To whom it may concern:

Please find enclosed the following Annual Business Report, together with the respective filing fee:

F02000002492

Superior Custom Vans RI, Inc.

\$150.00

Very truly yours,

*Richard D. Stoner/mbh*

Richard D. Stoner

/mbh  
Enclosure