SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600004119 (1)

SUPERIOR INTERNATIONAL BUSINESS VENTURES INC.

Principal Place of Business

Mailing Address

FILED Sep 18 1997 8:00am Secretary of State



2780 E. FOWLER AVE., STE. 137 TAMPA FL 33612		2780 E. FOWLER AVE., TAMPA FL 33612	2780 E. FOWLER AVE., STE. 137 TAMPA FL 33612		DO NOT WRITE	IN THIS SPA	ACE		
					3. Date Incorporated or Qualified 08/12/1996	3a. Date	of Last R	eport	
	lace of Business	2a. Mailing Address			4. FEI Number		-	oplied For	
21	Н	26			59-3352725			ot Applicable	
Suite, Ap1.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired	
City & State		City & State			Election Campaign Financing Trust Fund Contribution	· · · · · · · · · · · · · · · · · · ·			
Zip	Country	Zip	Country		8. This corporation owes or has paid the current year Intangible				
24 25 2 9. Name and Address of Current Re		29	30		Personal Property Tax due June			No	
14/01		ent Registered Agent	8	1 Name	10. Name and Address of New Re	Jistereo Ag	ənı		
	LFE, LARRY -A Jo hn Knox Road		Ľ	Namo					
	LAHASSEE FL 32303-6643		В	2 Street Ad	dress (P.O. Box Number is Not Acceptab	le)			
1740	DAMOOLL IL GEGGG GGGG		8	3					
			8	4 City			85 Zip (Code	
				City		FL	י בויף	2000	
11. Pursuant to office of reagent. I ar	to the provisions of Sections 607.0 egistered agont, or both, in the Sta m familiar with, and accept the obl	502 and 607,1508, Florida Stati ite of Florida. Such change was igations of, Section 607.0505, F	utes, the abo authorized l Torida Statut	ve-named co by the corpor es.	rporation submits this statement for the p ration's board of directors. I hereby accep	urpose of ch it the appoin	nanging it ntment as	s registered registered	
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable. (NC	1t Registered A	gent signature rec	quired when reinstating)	DATE			
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND D	IRECTOF	1S IN 12	
TITLE	CPS	☐ DELETE	1.1 TITLE				Change	Addition	
NAME	MARQUEZ, ANTHONY L		1.2 NAM						
STREET ADDRESS	2780 E. FOWLER AVE., STE	. 137	1.3 STAE	ET ADDRESS				'	
CITY-ST-ZIP	TAMPA FL 33612		1.4 CITY	-ST-ZIP					
TITLE		DELETE	2.1 TITLE	1		L	J Change	Addition	
NAME			2.2 NAM						
STREET ADDRESS			•	E1 ADDRESS					
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY 3.1 TITLE				Change	Addition	
NAME		_ otten	3.7 THE			L.	1 Change	L HOURION	
STREET ADDRESS				ET ADDRESS	•				
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TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	4.1 TITLE				Change	Addition	
NAME			4. 2 NAM	ŧ					
STREET ADDRESS			4.3 S1RE	ET ADDRESS					
CITY-ST-ZIP			4.4 CITY	S1 - ZIP				·	
TITLE		☐ DELETE	5.1 TITLE				Change	noitit bA	
NAME			5.2 NAM						
STREET ADDRESS			5.3 STRE	FT ADDRESS					
CITY-ST-ZIP		DALLETE	5.4 CITY				1 Cherry	A 404 (
TITLE		L_ DELETE	6.1 TITLE	ł		<u> </u>] Change	Addition	
NAME OTOTES ADODESS			6.2 NAM						
STREET ADDRESS			1	ET ADDRESS					
CITY-ST-ZIP	ov certify that the information suppl	lied with this filing does not aus	6.4 CITY	emption stat	ed in Section 119.07(3)(i), Florida Statute	s. I further o	ertify that	the	
informatio	on indicated on this annual report of	r supplementat annual report is	true and ac	curate and th	at my signature shall have the same lega ort as required by Chapter 607, Florida S	Leffect as if	made un	der path: that	