2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2007
Secretary of State

DOCUMENT# G90730

Entity Name: SUPER INSURANCE SERVICE, INC.

Current Principal Place of Business:

7855 SW 40 ST
MIAMI, FL 33155 US

New Principal Place of Business:

Current Mailing Address:

7855 SW 40 ST
MIAMI, FL 33155 US

New Mailing Address:

FEI Number: 59-2383994 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRULLON, CARMEN
7855 S.W. 40 STREET
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GRULLON, CARMEN
Address: 7855 SW 40 ST
City-St-Zip: MIAMI, FL 33155 US

Title: VP ( ) Delete
Name: ARIAS, JOSE V
Address: 7855 SW 40 ST
City-St-Zip: MIAMI, FL 33155 US

Title: D ( ) Delete
Name: LLULL, JENNIFER
Address: 10465 SW 56 STREET
City-St-Zip: MIAMI, FL 33165 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: LLULL, CARLA N
Address: 10465 SW 56 STREET
City-St-Zip: MIAMI, FL 33165 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GRULLON CARMEN P 03/27/2007

Electronic Signature of Signing Officer or Director Date