2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G90730

FILED Apr 28, 2009 Secretary of State

Entity Name: SUPER INSURANCE SERVICE INC.

Entity Nai	ile. SOF	LK INSUKAI	NOL SERVICE, INC.					
Current Principal Place of Business:				New Prince	New Principal Place of Business:			
7855 SW 4 MIAMI, FL		US						
Current Mailing Address:				New Mail	New Mailing Address:			
7855 SW 4 MIAMI, FL		US						
FEI Number:	59-238399	4 FEI Nu	mber Applied For()	FEI Number Not App	olicable ()	Certificate of Status De	esired ()	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
GRULLON 7855 S.W. MIAMI, FL	40 STRE							
The above in the State			this statement for the p	urpose of changing	its registered	office or registered age	ent, or both,	
SIGNATUF	RE:							
	Ele	ctronic Signa	ture of Registered Age	ent	Date			
Election Can	npaign Fina	ıncing Trust Fu	und Contribution ().					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	7855 SW	() Delete I, CARMEN 40 ST . 33155 US		Title: Name: Address: City-St-Zip:	(() Change () Addition		
Title: Name: Address: City-St-Zip:		() Delete		Title: Name: Address: City-St-Zip:	LLULL, JENN 5962 SW 162	2 CT		

I hereby certify that the information supplied with this filing does not qualify 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: CARMEN GRULLON P 04/28/2009