


FILED
Sep 12, 2005 8:00 am
Secretary of State

04-19-2005 90392 042 ***158.75
 09-12-2005 90004 022 ***400.00

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # H67604
 1. Entity Name
 SUPERIOR CONTRACTING OF CENTRAL FLORIDA, INC.



Principal Place of Business 11401 HWY. 301 NORTH THONOTOSASSA, FL 33592 US	Mailing Address PO BOX 16800 TAMPA, FL 33687 US
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50066479



04052005 No Chg-P CR2E034 (10/03)

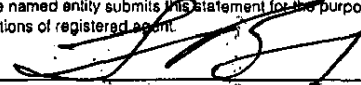
DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2695828	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 BENYLOBS, LOUIS
 GIBBONS, CARY A.
 104 NE LAKEVIEW DRIVE
 SEBRING, FL 33870

**DO NOT WRITE
 IN THIS SPACE**

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.

SIGNATURE  LOUIS BENYLOBES DATE 9-8-05

Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing \$5.00 May Be Added to Fees
 Trust Fund Contribution

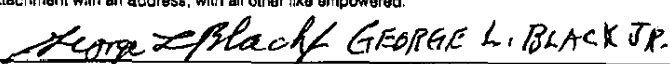
**FILE NOW!!! FEE IS \$150.00 ...
 After May 1, 2005 Fee will be \$550.00**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BLACK, GEORGE L., JR. 11401 HWY. 301 N. THONOTOSASSA, FL 33592
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 IN THIS SPACE**

12. I hereby 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 of 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:  GEORGE L. BLACK JR. DATE 9/19/05 (813) 986-2989

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



ATTACHMENT
50066479

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 24, 2005

SUPERIOR CONTRACTING OF CENTRAL FLORIDA, INC.
PO BOX 16800
TAMPA, FL 33687 US

SUBJECT: SUPERIOR CONTRACTING OF CENTRAL FLORIDA, INC.
Ref. Number: H67604

Please be advised, we have received your annual report/uniform business report for the above corporation and your check(s) totaling \$158.75; however, the report **has not been filed** and a copy is being returned for the following:

Our office previously returned a copy of the annual report for corrections. Enclosed is a copy of the annual report and reject letter. To date, we have not received the corrected report back. Please make the corrections on the annual report and return it to our office for filing.

Balance due is \$400.00 (late fee) see attached letter.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCAION, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tina Roberts
Document Specialist

Letter Number: 705A00053686