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FILED

Feb 12 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # H98144 (9)

1. Corporation Name  
SUPERIOR ALMONDS II, INC.

Principal Place of Business  
3069 E. CARRIGAN CANYON DR.  
SALT LAKE CITY UT 84109  
US

Mailing Address  
P.O. BOX 521238  
SALT LAKE CITY UT 84152  
US



3. Date Incorporated or Qualified 02/06/1986  
3a. Date of Last Report 01/30/1996

4. FEI Number 59-2633508  
Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARBARA J. PETROSKI  
100 W LUCERNE CIR  
STE 504  
ORLANDO FL 32801

81 Name Erich Huemer  
82 Street Address (P.O. Box Number is Not Acceptable) 1400 International Drive  
83  
84 City Orlando FL 85 Zip Code 32819

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Erich Huemer*

1-10/97

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME HAMILTON, FINLEY M.  
STREET ADDRESS 2120 S 1300 E STE 101  
CITY-ST-ZIP SALT LAKE CITY UT

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 3069 E. Carrigan Canyon Dr.  
1.4 CITY-ST-ZIP Salt Lake City, UT 84109

TITLE PD ☐ DELETE  
NAME PETERSON MARILYN H  
STREET ADDRESS 2120 SOUTH 1300 EAST #101  
CITY-ST-ZIP SALT LAKE CITY UT

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 3069 E. Carrigan Canyon Dr.  
2.4 CITY-ST-ZIP Salt Lake City, UT 84109

TITLE S ☐ DELETE  
NAME TOBLER, JENNIFER  
STREET ADDRESS 2120 S 1300 E STE 101  
CITY-ST-ZIP SALT LAKE CITY UT

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS 3069 E. Carrigan Canyon Dr.  
3.4 CITY-ST-ZIP Salt Lake City, UT 84109

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/97 801-487-4048

Date Daytime Phone

CR2E034 (9/96)