

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J44817

1. Entity Name

SUPERIOR EXTERIORS, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90105 042 ***150.00

Principal Place of Business

5180 WEST ATLANTIC AVENUE
#119
DELRAY BEACH FL 33484
US

Mailing Address

% NINA FURRY
5070 WOODSTONE CIRCLE NORTH
LAKE WORTH FL 33436-6778
US

2. Principal Place of Business

3. Mailing Address

8 Southern Cross Cir

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#106

City & State

City & State

Boynton Beach FL

Zip

Country

Zip

Country

33436

U.S.

4. FEI Number

59-2771196

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FURRY, HUBERT
5070 WOODSTONE CIRCLE NORTH
LAKE WORTH FL 33463

Name

Same

Street Address (P.O. Box Number is Not Acceptable)

8 Southern Cross Cir #106

City

Boynton Beach

FL

Zip Code

33436

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.

SIGNATURE

Hubert Furry

(NOTE: Registered Agent signature required when reinstating)

DATE

4-15-00

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☒

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

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**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPT
FURRY, NINA
5070 WOODSTONE CIRCLE NORTH
LAKE WORTH FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP
FURRY, NINA
5070 WOODSTONE CIR. N.
LAKE WORTH FL

☐ Delete

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP
8 Southern Cross Cir #106
Boynton Beach FL 33436

☒ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
Same

☒ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

13. 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 or 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Nina Furry

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-00

Date

861 495-0444

Daytime Phone #