

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

APPROVED
AND
FILED

97 JUL 29 PM 12:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # K04387 (2)

1. Corporation Name
SUPERIOR AQUA ENTERPRISES, INC.

Principal Place of Business SUPERIOR AQUA ENTERPRISES, INC 2140 BISPHAM RD SARASOTA FL 34231 US	Mailing Address 2140 BISPHAM RD SARASOTA FL 34231 US
---	--



DO NOT WRITE IN THIS SPACE

21 2. Principal Place of Business Suite, Apt. #, etc.	22 City & State	23 Zip	24 Country	25	26 2a. Mailing Address Suite, Apt. #, etc.	27 City & State	28 Zip	29 Country	30
---	------------------------	---------------	-------------------	-----------	--	------------------------	---------------	-------------------	-----------

3. Date Incorporated or Qualified 11/30/1987	3a. Date of Last Report 04/05/1996
4. FEI Number 65-0013544	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

GANIM, RICHARD A.
~~7850 S TAMiami TR~~
SARASOTA FL 34231

10. Name and Address of New Registered Agent

81 Name **RICHARD A. GANIM**

82 Street Address (Do Not Accept Box Number) **2140 BISPHAM RD.**

83

84 City **SARASOTA** **FL** **85** Zip Code **34231**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	GANIM, RICHARD	
STREET ADDRESS	5273 SUNNYDALE CIRCLE E.	
CITY-ST-ZIP	SARASOTA FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	MUHA, JAMES	
STREET ADDRESS	3018 GRAFTON DR.	
CITY-ST-ZIP	SARASOTA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MANHARDT, JOHN	
STREET ADDRESS	2729 LONGBOAT DRIVE	
CITY-ST-ZIP	NAPLES FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

<input type="checkbox"/> Change <input type="checkbox"/> Addition
11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

600002253566-4
-07/31/97-DI031-002
***165.00 ***165.00

8/27/90

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 *Richard A. Ganim* _____ DATE *94-923-222* _____

CR2E034 (4/97)