

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L04743

FILED  
Jan 07, 2010  
Secretary of State

**Entity Name:** SUPERIOR TECHNOLOGICAL INTERPRISES, INC.

**Current Principal Place of Business:**

9820 NW 80 AVE  
UNIT 6T  
HIALEAH GARDENS, FL 33016 US

**New Principal Place of Business:**

**Current Mailing Address:**

% ALBERTO MENCIA  
8004 NW 154 ST STE 123  
MIAMI LAKES, FL 33016

**New Mailing Address:**

**FEI Number:** 65-0134530      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MENCIA, ALBERTO  
8191 NW 98TH LANE  
HIALEAH GARDENS, FL 33016 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DPT  
**Name:** MENCIA, ALBERTO DPT  
**Address:** 8191 NW 98 TH LANE  
**City-St-Zip:** HIALEAH GARDENS, FL 33016

**Title:** V  
**Name:** MENCIA, YOLANDA R V  
**Address:** 8191 NW 98TH LANE  
**City-St-Zip:** HIALEAH GARDENS, FL 33016

**Title:** S  
**Name:** MENCIA, ISABEL S  
**Address:** 15151 NE 13 AVE  
**City-St-Zip:** NORTH MIAMI BEACH, FL 33179

I hereby 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 all other like empowered.

**SIGNATURE:** ALBERTO MENCIA

DPT

01/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date