

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 20, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000033907

1. Entity Name
SUPERIOR DEVELOPMENT LLC



Principal Place of Business
**P O BOX 415138
MIAMI BEACH, FL 33141**

Mailing Address
**PO BOX 415138
MIAMI BEACH, FL 33141**



04172007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2656244

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CARLIER, ROGER
6411 SW 62ND TERR
MIAMI, FL 33143**

**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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

U000000719336
05/01/07-80061-005 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	CARLIER, ROGER
STREET ADDRESS	6411 SW 62ND TERR
CITY - ST - ZIP	MIAMI, FL 33143
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/17/07 786-218-8049
Date Daytime Phone #