

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000035136

Entity Name: G & O SUPERIOR, LLC

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

2826 BROADWAY
SUITE 207
RIVIERA BEACH, FL 33404

New Principal Place of Business:

Current Mailing Address:

2826 BROADWAY
SUITE 207
RIVIERA BEACH, FL 33404

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MAURIVAL, ORPHA REV
4812 VICTORIA CIRCLE
WEST PALM BEACH, FL 33409 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LUNING, REIN
Address: 160 W CAMENO REAL #179
City-St-Zip: BOCA RATON, FL 33432

Title: MGRM () Delete
Name: MAURIVAL, GELINE
Address: 4812 VICTORIA CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: MGRM () Delete
Name: NEWMAN, ROBERT N
Address: 16856 90TH ST N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: MGR () Delete
Name: MAURIVAL, ORPHA
Address: 4812 VICTORIA CIR.
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MAURIVAL, ORPHA
Address: 4812 VICTORIA CIR.
City-St-Zip: WEST PALM BEACH, FL 33409

Title: MGRM (X) Change () Addition
Name: EDOUARD, LAMONTH
Address: 5121 N 44TH ST
City-St-Zip: TAMPA, FL 33610

Title: MGRM (X) Change () Addition
Name: PIERRE, WILLY
Address: 6252 WILLOUGHBY CIR
City-St-Zip: LAKE PARK, FL 33463

Title: MGRM (X) Change () Addition
Name: FRANCOIS, CRIZAULD
Address: 201 LINSBURY RD
City-St-Zip: WEST HARTFORD, CT 06117

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ORPHA MAURIVAL

MGR

05/01/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date