

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 30 AM 8:42

DOCUMENT # L13584

(2)

1. Corporation Name

SUPERIOR HARDWARE, INC.

Principal Place of Business

C/O CHRISTA STEPHAN
3010 SE MONROOST Monroe St.
STUART FL 34997
US

Mailing Address

C/O CHRISTA STEPHAN
3010 SE MONROOST Monroe St.
STUART FL 34997
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/31/1989

3a. Date of Last Report

04/14/1994

4. FFI Number

65-0318361

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 3010 SE MONROOST ST

Suite, Apt. #, etc.

22

City & State

23 STUART FL

Zip

24 34997

Country

2a. Mailing Address

26 3010 SE MONROOST ST

Suite, Apt. #, etc.

27

City & State

28 STUART FL 34997

Zip

29

Country

30

9. Name and Address of Current Registered Agent

STEPHAN, CHRISTA
3171 SE DOMINICA TERRACE
STUART FL 34997

10. Name and Address of New Registered Agent

81 Name

STEPHAN, CHRISTA

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

3010 SE MONROOST ST

83

84 City

STUART

FL

85 Zip Code

34997

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

(Signature) (Typed name of registered agent and title) (Address)

(Signature) (Typed name of registered agent and title) (Address)

(Date)

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

PD

STEPHAN, CHRISTA
3010 SE MONROOST
STUART FL

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

V

STEPHAN, ERNEST
3010 SE MONROOST
STUART FL

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

☐ Change

☐ Addition

3010 SE MONROOST ST

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY ST ZIP

☐ Change

☐ Addition

3010 SE MONROOST ST

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY ST ZIP

☐ Change

☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY ST ZIP

☐ Change

☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY ST ZIP

☐ Change

☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY ST ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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:

Christa Stephan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/95
Date

407-283-6029
Telephone Number