

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# L23002

FILED
Feb 20, 2008
Secretary of State**Entity Name:** SUPERIOR COMMERCIAL SERVICES, INC.**Current Principal Place of Business:**19241 PERSIMMON RIDGE RD
ALVA, FL 33920 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 1021
ALVA, FL 33920**New Mailing Address:****FEI Number:** 65-0138338 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**KETCHEM, MICHAEL
19771 GOIN OUTBACK DRIVE
ALVA, FL 33920 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**OFFICERS AND DIRECTORS:****Title:** PRES () Delete
Name: KETCHEM, MICHAEL
Address: 19771 GOIN OUTBACK DRIVE
City-St-Zip: ALVA, FL 33920 US**Title:** VPRES (X) Delete
Name: RIGGI, BONNIE L
Address: P.O. BOX 1193
City-St-Zip: INDIAN ROCKS BEACH, FL 33785 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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 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 an address, with all other like empowered.

SIGNATURE: MICHAEL KETCHEM

PRES

02/20/2008

Electronic Signature of Signing Officer or Director_____
Date