

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0060513 AV

DOCUMENT # **L51294**

1. Entity Name
SUPER EXPRESS DISTRIBUTION, INC.



FILED

03 SEP 25 AM 8:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

**13320 SW 103 AVENUE
MIAMI FL 33176
US**

Mailing Address

**13320 SW 103 AVENUE
MIAMI FL 33176
US**

2. Principal Place of Business

**1801 SW 90 AVE
Suite, Apt. #, etc.**

3. Mailing Address

**P.O. Box 163636
Suite, Apt. #, etc.**

☐ CHECK HERE IF MAKING CHANGES

City & State

MIAMI, FLA

City & State

MIAMI, FLA

4. FEI Number

65-0189214

Applied For

Not Applicable

Zip

33165

Country

USA

Zip

33166-3636

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GOMEZ, GERARDO
11520 SW 100 ST
8805 SW 76TH TERRACE
MIAMI FL 33173**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☒

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **GOMEZ, GERARDO**
STREET ADDRESS **8805 SW 76 TERRACE**
CITY-ST-ZIP **MIAMI FL 33173**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME **900023451809**
STREET ADDRESS **09/30/03--01049--021**
CITY-ST-ZIP ****155.00**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

9/24/03 (305) 333-8479

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

September 23, 2003.

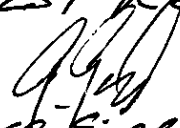
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
SECRETARY OF STATE.
GLENDA E. HOOD.

DEAR SIRs:-----

PLEASE BE ADVISE THAT DUE TO THE
FACT THAT THE U.S. POST OFFICE FAIL
TO FOLLOW MY INSTRUCTIONS TO CHANGE
MY FORWARDING ADDRESS THIS YEAR, I
DID NOT RECEIVED THE 2003 UNIFORM
BUSINESS REPORT UNTIL I CAME BACK FROM
A BUSINESS TRIP. LAST Monday Sep 22, 2003.
THEREFORE I WILL LIKE TO REQUEST
ADVATEMENT OF PENALTY

LOOKING FORWARD FOR YOUR
— UNDERSTANDING AND CONSIDERATION FOR
THIS MATTER.

BEST REGARD.


SUPER EXPRESS DIST.
FEIN #65-0189214