

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L62116 (3)
1. Corporation Name
SUPER SHIFT, INC.



Principal Place of Business % HERBERT GOLDBERG 480 SOUTH WOODLAND BLVD. DELAND FL 32720	Mailing Address % HERBERT GOLDBERG 480 SOUTH WOODLAND BLVD. DELAND FL 32720
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 134 MASON AVENUE Suite, Apt. #, etc.		2a. Mailing Address 26 134 MASON AVENUE Suite, Apt. #, etc.		3. Date Incorporated or Qualified 04/04/1990	
22 City & State 23 DAYTONA BEACH FL. Zip 24 32117 Country 25 US.		27 City & State 28 DAYTONA BEACH FL. Zip 29 32117 Country 30 US.		4. FEI Number 59-3012993 Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent GOLDBERG, HERBERT 480 SOUTH WOODLAND BLVD. DELAND FL 32720				10. Name and Address of New Registered Agent 81 Name Robert A. Goldberg 82 Street Address (P.O. Box Number is Not Acceptable) 134 MASON AVENUE 83 84 City DAYTONA BEACH FL 85 Zip Code 32117			
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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 *Robert A. Goldberg* *Robert A. Goldberg* DATE 4-20-98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input type="checkbox"/> DELETE	1.1 TITLE	vice president	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GOLDBERG, HERBERT		1.2 NAME				
STREET ADDRESS	116 LAUGHING GULL COURT		1.3 STREET ADDRESS				
CITY-ST-ZIP	DAYTONA BEACH FL		1.4 CITY-ST-ZIP				
TITLE	V	<input type="checkbox"/> DELETE	2.1 TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BERGER, EDWARD		2.2 NAME				
STREET ADDRESS	17 QUEEN ANN COURT		2.3 STREET ADDRESS				
CITY-ST-ZIP	ORMOND BEACH FL		2.4 CITY-ST-ZIP				
TITLE	S	<input type="checkbox"/> DELETE	3.1 TITLE	President, Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GOLDBERG, ROBERT		3.2 NAME				
STREET ADDRESS	8 WALDEN LANE		3.3 STREET ADDRESS				
CITY-ST-ZIP	ORMOND BEACH FL		3.4 CITY-ST-ZIP				
TITLE	T	<input checked="" type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GOLDBERG, PAUL		4.2 NAME				
STREET ADDRESS	116 LAUGHING GULL COURT		4.3 STREET ADDRESS				
CITY-ST-ZIP	DAYTONA BEACH FL		4.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

14. 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 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: *Robert A. Goldberg* 4-20-98 004-253-766P

CR2E034 (10/97)