

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90143 030 ***158.75

DOCUMENT # P00000005896

1. Entity Name

SUPERIOR TECHNOLOGY OF SOUTH FLORIDA, INC.



Principal Place of Business

**15210 SW 172ND ST
MIAMI FL 33187**

Mailing Address

**15210 SW 172ND ST
MIAMI FL 33187**

2. Principal Place of Business

15210 S.W. 172 ST.

3. Mailing Address

15210 SW 172 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FLA.

City & State

MIAMI, FLA

Zip

Country

33187

USA

Zip

Country

33187

USA

4. FEI Number

65-0975236

Applied For

Not Applicable

5. Certificate of Status Desired

X

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**CEARRA, JUAN B
8550 W. FLAGLER ST
#119
MIAMI FL 33144**

7. Name and Address of New Registered Agent

Name **JUAN B. CEARRA**
Street Address (P.O. Box Number is Not Acceptable)
15210 SW 172 ST.
City **MIAMI, FLA.** FL Zip Code **33187**

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]

JUAN B. CEARRA

4/22/03

Signature, typed or printed name of registered agent and fee, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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 **CEARRA, JUAN B**
STREET ADDRESS **15210 SW 172ND ST**
CITY-ST-ZIP **MIAMI FL 33187**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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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] **JUAN B. CEARRA**

4/22/03

(305) 235-0733

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)