2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000006350

Entity Name: SUPERNETS, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
PO BOX 4792 MIAMI LAKES, FL 33014	5402 WELLCRAFT DR GREENACRES, FL 33463

Current Mailing Address:	**New Mailing Address:**
PO BOX 4792 MIAMI LAKES, FL 33014	5402 WELLCRAFT DR GREENACRES, FL 33463

FEI Number: 65-0976606   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
ANEZ, HUMBERTO PO BOX 4792 MIAMI, FL 33014 US	ANEZ, HUMBERTO 5402 WELLCRAFT DR GREENACRES, FL 33463 US

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: HUMBERTO ANEZ   03/29/2007
_____
          Electronic Signature of Registered Agent   Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Name: ANEZ, HUMBERTO Address: 5402 WEELLCRAFT DRIVE City-St-Zip: GREENACRES, FL 33463	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: D ( ) Delete Name: ANEZ, VIRGINIA Address: 5402 WEELLCRAFT DRIVE City-St-Zip: GREENACRES, FL 33463	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: HUMBERTO ANEZ   D   03/29/2007
_____
          Electronic Signature of Signing Officer or Director   Date