

# 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000000295

**FILED**  
**Oct 21, 2010**  
**Secretary of State**

**Entity Name:** SUPERIOR AUTOMOTIVE CENTER, INC

**Current Principal Place of Business:**

3550 BARRANCAS AVE  
PENSACOLA, FL 32507

**New Principal Place of Business:**

**Current Mailing Address:**

3550 BARRANCAS AVE  
PENSACOLA, FL 32507

**New Mailing Address:**

**FEI Number:** 02-0533632      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HINTON, SHERRI  
8902 BOWMAN AVE.  
PENSACOLA, FL 32534      US

**Name and Address of New Registered Agent:**

HINTON, SHERRI  
8395 BOWMAN AVE.  
PENSACOLA, FL 32534      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: SHERRI HINTON

\_\_\_\_\_  
Electronic Signature of Registered Agent

10/21/2010

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MEYERS, KAREN D  
**Address:** 8902 BOUMAN AVE  
**City-St-Zip:** PENSACOLA, FL 32534

**Title:** VST  
**Name:** HINTON, SHERRI  
**Address:** 8395 BOWMAN AVE  
**City-St-Zip:** PENSACOLA, FL 32534

**Title:** D  
**Name:** HINTON, JOHN  
**Address:** 8395 BOWMAN AVW  
**City-St-Zip:** PENSACOLA, FL 32534

I hereby 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 all other like empowered.

SIGNATURE: KAREN D MYERS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P

10/21/2010

\_\_\_\_\_  
Date