## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DO NOT WRITE IN THIS SPACE

## DOCUMENT # P0200039387 1. Entity Name Superior Postal Express INC



## **FILED** Apr 28, 2003 8:00 am Secretary of State

04-28-2003 91514 005 \*\*\*150.00

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	and the state of t	and the second of the second o		T. P. Carlotte					
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc. 452 <b>3</b> TAMARINA DR		Suite, Apt. #, etc. 4523 TAMARINA Dr			DO NOT WRITE IN THIS SPACE				
PACE	FL	City & State PACE FA	2	4. FF	Number 0579426		Applied For Not Applicable		
Zip <b>325</b>	21 SOUNTRY A ROSA	32571	SANTA RUS.	<b>5</b> . Ce	ertificate of Status Desired		5 Additional lequired		
nga ay san ay		The control of the second	e tra		e and Address of Current Regi	stered Ager	ıt		
			Name_	ARL-	M. Tutt SR				
	DO NOT W	RHE	Street Add	ress (P.O. Bo)	(Number is Not Acceptable)				
	IN THIS SP	ACE	1/-	4515 TAMARINA DR					
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		and the second of the second o	$\bigcap$ City $\bigcap$	200			o Code		
8. The above	named entity submits this statement for	the purpose of changing	its registered office or re	egistered ager	it, or both, in the State of Florida.	<del>ت اا</del> I am familiar	with, and accept		
the obligati	ions of registered agent	/ .							
	fact my	Texto L	Carla	n Tut	t Sn PUSTD	4-21	-2003		
SIGNATURE _	Signature, typed or printed name of registered agent a	nd title if applicable. (N	OTE: Registered Agent signature		· - /	DATE	<del></del> -		
Jar	nuary 1 - May 1 Fee is \$150.00		<u></u>		9. Election Campaign Financin		<b>*</b> = 00		
	After May 1, Fee is \$550.00 Amended UBR is \$61.25				Trust Fund Contribution.	~ —	\$5.00 May Be Added to Fees		
Make Check	Payable to Florida Department of	(grammaring triumate)							
10.	OFFICERS AND [	DIRECTORS		4.0		· · · · · · · · · · · · · · · · · · ·			
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indicatéd of the cor	ertify that the information supplied with on this report or supplemental report is poration or the receiver or trustee emport at with an address, with all other like emports.	true and accurate and that owered to execute this rep	t my signature shall have	I in Section 11 e the same led	9.07(3)(i), Florida Statutes. I furthe	hat I am an d	officer or director		