2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

May 03, 2004 8:00 am Secretary of State DOCUMENT # P02000095535 05-03-2004 91066 042 ***150.00 1. Entity Name SUPERGRADING, INC. Principal Place of Business Mailing Address 94082859 1722 STAYSAIL DRIVE 1722 STAYSAIL DRIVE VALRICO, FL 33594 VALRICO, FL 33594 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01232004 CR2E034 (10/03) Chg-P Applied For City & State City & State 4. FEI Number 55-0797035 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KEITH, W.C. Street Address (P.O. Box Number is Not Acceptable) 1722 STAYSAIL DRIVE VALRICO, FL 33594 City Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE TITLE ☐ Addition Change WEINTRAUB, STEVEN NAME NAME STREET ADDRESS 1722 STAYSAIL DRIVE STREET ADDRESS CITY-ST-ZIP VALRICO, FL 33594 CITY-ST-ZIP Delete TITI F TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CTIY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition ☐ Change STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Change ☐ Delete TITLE Addition NAME NAME STREET ADDRESS 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 of rustee 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 at other like empowered.

FILED