

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90342 041 ***150.00

**2006 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P03000085998
1. Entity Name
SUPERLATIVE ENTERPRISES INC.



2. Principal Place of Business
10460 Roosevelt Blvd N #242
Suits, Apt. #, etc.
242

3. Mailing Address
SAME
State, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
ST PETERSBURG, FL

City & State

4. FEI Number **47-0926544**

Additional Fee Applied

Zip **33716**

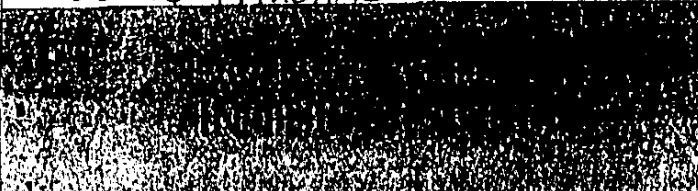
County **Pinellas**

Zip

County

5. Certificate of Status Desired

\$8.75 Additional Fee Required



7. Name and Address of Current Registered Agent

Name **GENE BRICE**

Street Address (P.O. Box Number is Not Acceptable) **10460 Roosevelt Blvd N #242**

City **ST PETERSBURG FL** Zip/County **33716**

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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____



9. Election Campaign Financing Trust Fund Contribution \$5.00 May be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P.V.S.T**
NAME **GENE BRICE**
STREET ADDRESS **10460 Roosevelt Blvd N #242**
CITY-ST-ZIP **ST PETERSBURG, FL 33710**

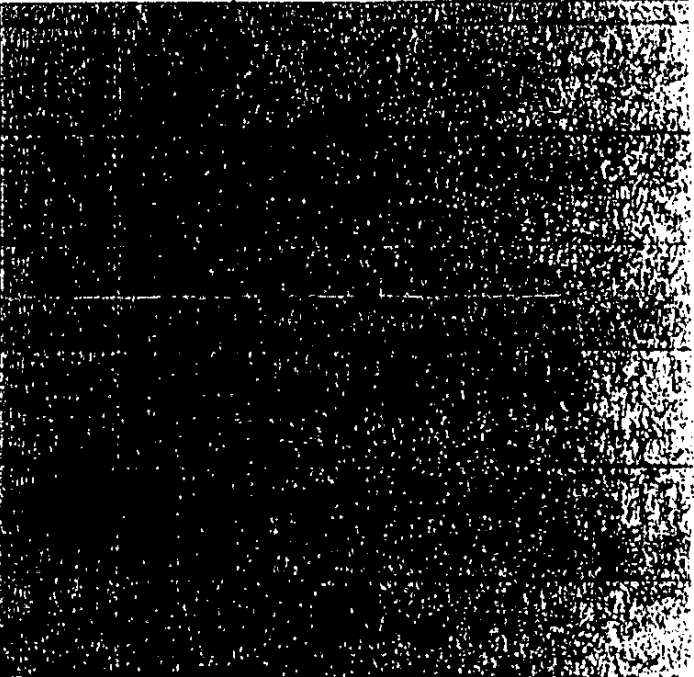
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and 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 on an attachment with an address, with all other filers empowered.

SIGNATURE:

4/1/06

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

Daytime Phone #