

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000164255

FILED
May 02, 2006
Secretary of State

Entity Name: SUPERIOR INSTALLATION SERVICES, INC.

Current Principal Place of Business:

1699 E. MAIN STREET
SUITE A
LEESBURG, FL 34748

New Principal Place of Business:

1699 E. MAIN STREET
SUITE A
LEESBURG, FL 34748 US

Current Mailing Address:

1699 E. MAIN STREET
SUITE A
LEESBURG, FL 34748

New Mailing Address:

1699 E. MAIN STREET
SUITE A
LEESBURG, FL 34748 US

FEI Number: 57-1193675

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCURRY, ASHLEY B
1699 E. MAIN STREET
SUITE A
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCCURRY, ASHLEY B
Address: 1699 E. MAIN STREET SUITE A
City-St-Zip: LEESBURG, FL 34748

Title: VP () Delete
Name: LEON, JULIO C
Address: 1699 EAST MAIN STREET - A
City-St-Zip: LEESBURG, FL 34788

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCCURRY, ASHLEY B
Address: 1699 E. MAIN STREET SUITE A
City-St-Zip: LEESBURG, FL 34748 US

Title: VP (X) Change () Addition
Name: LEON, JULIO C
Address: 1699 EAST MAIN STREET - A
City-St-Zip: LEESBURG, FL 34788 US

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: ASHLEY B MCCURRY

PD

05/02/2006

Electronic Signature of Signing Officer or Director

Date