

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000105662

FILED
Apr 13, 2009
Secretary of State

Entity Name: SUPERIOR CARPENTRY & PAINTING INC.

Current Principal Place of Business:

4257 PINCUSHION ST
NORTH PORT, FL 34286

New Principal Place of Business:

Current Mailing Address:

4257 PINCUSHION ST
NORTH PORT, FL 34286

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYERS, PHILLIP D
4257 PINCUSHION ST
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

SPITSA, OLGA
4257 PINCUSHION ST
NORTH PORT, FL 34286 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: OLGA SPITSA

04/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHMYKHALOV, VLADIMIR
Address: 4257 PINCUSHION ST
City-St-Zip: NORTH PORT, FL 34286

Title: V () Delete
Name: MYERS, PHILLIP D
Address: 214 113TH STREET EAST
City-St-Zip: BRADENTON, FL 34212

Title: S (X) Delete
Name: GOMEZ, JAIME J
Address: 5200 WINDING WAY
City-St-Zip: SARASOTA, FL 34242

Title: T (X) Delete
Name: SPITSA, ALEXANDER
Address: 4157 PINCUSHION ST
City-St-Zip: NORTH PORT, FL 34286

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: SPITSA, OLGA
Address: 4257 PINCUSHION ST
City-St-Zip: NORTH PORT, FL 34286

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: OLGA SPITSA

V

04/13/2009

Electronic Signature of Signing Officer or Director

Date