## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P93000009437 (3)

**DOCUMENT #** 1. Corporation Name

> 5408 SW 139 CT **MIAMI FL 33175**

SUPER GLOBAL, INC.

Mailing Address Principal Place of Business 15265 SW 143 AVE 5408 SW 139 CT MIAMI FL 33177 MIAMI FL 33175

2. Principal Place of	Business	2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zφ	Country	Zip Co	ountry
24	25	29 30	

SANCHEZ, WILLIAM

	Trust Fund Contribution	Added to 1 663
ılcy	8. This corporation has liability for intang Florida Statutes 🔲 Yes 💥	ible tax under s. 199.032, No
	10. Name and Address of New Regist	ered Agent
81	Nanie	
82	Street Address (P.O. Box Number is Not Acceptable)	
83		
84	City	85 Zip Code

3. Date incorporated or Qualified 02/08/1993

65-0385594

5. Certificate of Status Desired

6. Election Campaign Financing

3a. Date of Last Report 05/23/1995

Applied For

Fee Required \$5.00 May Be

Added to Enge

Not Applicable \$8.75 Additional

11. Pursuant to the provisions of Sections 607.05.02 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am

NATURE _ Syrai.e	el typed or printed name of regeltered against and trie		CE Registered Agent signature resoured v	Verificating	CLUCEDS AND DIRECTO	RS IN 12
	OFFICERS AND DIR		13.	ADDITIONS/CHANGES TO	Change	Addition
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(TI MUUTILUU	526 SW 143RD AVE		1.3 STREET ADDRESS			
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VI.	-	□ DELEJE	2 1 1-ILF		□ Change	Montio.
	ANCHEZ, WILLIAM		2.2 NAME			
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	ANCHEZ, WILLIAM		3.2 NAME			
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under carbit, 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 12 or Block 13 if changed, or on an attaching it with a partiess.

SIGNATURE:

SIGNING OFFICER OR DIRECTOR

4-1-96

Distance Phone #