

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 22, 2004 08:00 AM
Secretary of State

DOCUMENT # P94000002695 1. Entity Name ANCO-SUPERIOR INCORPORATED	
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Principal Place of Business 7513-A NORTH ARMENIA AVE. TAMPA, FL 33604	Mailing Address 7513-A NORTH ARMENIA AVE. TAMPA, FL 33604
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DO NOT WRITE IN THIS SPACE



07172004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3219569	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent PERNAS, DANIEL K 7513-A NORTH ARMENIA AVE. TAMPA, FL 33604	DO NOT WRITE IN THIS SPACE
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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 reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PERNAS, DANIEL K 7513-A NORTH ARMENIA AVE. TAMPA, FL 33604
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PERNAS, CARMEN 7513-A NORTH ARMENIA AVE. TAMPA, FL 33604
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CASTELLANO, SAMMY 12202 WOODDUCK PLACE TAMPA, FL 33617
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DINA, LOBEL 7505 EGYPT LK. DRIVE TAMPA, FL 33614
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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07/22/04-80006-010 150.00

**DO NOT WRITE
IN THIS SPACE**

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 or trustee 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 all other like empowered.

SIGNATURE: Daniel K. Pernas **DANIEL K. PERNAS** 7/16/04 (813) 933-4466
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #