

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000068634 (1)

1. Corporation Name

SUPERIOR COMMERCIAL DEVELOPERS, INC.



Principal Place of Business

3315 HENDERSON BLVD.  
TAMPA FL 33609

Mailing Address

3315 HENDERSON BLVD.  
TAMPA FL 33609

3. Date Incorporated or Qualified

09/06/1995

3a. Date of Last Report

2. Principal Place of Business

21 103 SOUTH BOWLEAVRD

2a. Mailing Address

26 103 SOUTH BOWLEAVRD

4. FEI Number

59-3380326

Applied For  
Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State

TAMPA, FL

28 City & State

TAMPA FL

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 Zip

33606

Country

25 HILLSBOROUGH

29 Zip

33606

Country

30 HILLSBOROUGH

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes  No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes.

SIGNATURE

Signature of Officer or Director responsible for this filing (required)

Signature of Registered Agent (required when registering)

(Date)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
PT	DRISCOLL, RICHARD W	3315 HENDERSON BLVD.	TAMPA FL 33609	<input type="checkbox"/>
VS	SILVER, JOSEPH S	3315 HENDERSON BLVD.	TAMPA FL 33609	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP	31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP	41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP	51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP	61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
																								<input type="checkbox"/>	<input type="checkbox"/>
																								<input type="checkbox"/>	<input type="checkbox"/>
																								<input type="checkbox"/>	<input type="checkbox"/>
																								<input type="checkbox"/>	<input type="checkbox"/>
																								<input type="checkbox"/>	<input type="checkbox"/>

400001882954  
-07/03/96--01024--035  
\*\*\*200.00

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 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 12 or Block 13 unchanged, or on an attachment with an address.

SIGNATURE:

*Joseph S Silver*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-96  
Date

CR2E034 (12/95)