

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90204 019 ***150.00

600000333



01032007 Chg-P CR2E034 (12/06)

DOCUMENT # P95000089673 1. Entity Name SUPERIOR AUTOS INC.					
Principal Place of Business 174 NW 79TH ST MIAMI, FL 33150 US			Mailing Address 174 NW 79TH ST MIAMI, FL 33150 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address 14151 N.W. 3rd Avenue Suite, Apt. #, etc.			
City & State MIAMI, FL		City & State MIAMI, FL		4. FEI Number 65-0630753	
Zip 33168		Country U.S.A.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BACCHUS, MOSES 14151 NW 3RD AVE MIAMI, FL 33168			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BACCHUS, MOSES 174 NW 79TH ST MIAMI, FL 33150	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BACCHUS, MOSES 14151 NW 3RD AVENUE MIAMI, FL 33168
		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BACCHUS, JASON 174 NW 79TH ST MIAMI, FL 33150	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BACCHUS, JASON 279 NE 201 TERRACE MIAMI, FL 33179
		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BACCHUS, JOYCELYN 174 NW 79TH ST MIAMI, FL 33150	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BACCHUS, JOYCELYN 14151 N.W. 3RD AVENUE MIAMI, FL 33168
		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
<input type="checkbox"/> Change <input type="checkbox"/> Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
<input type="checkbox"/> Change <input type="checkbox"/> Addition					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Jason P. Bacchus</u> <u>JASON P. BACCHUS</u> 1-15-07 305-688-4942					