2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000015591

Entity Name: SUPERIOR CONCEPTS & PRODUCTS, INC.

FILED Apr 29, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 12066 SW 117 COURT MIAMI, FL 33186 US **Current Mailing Address: New Mailing Address:** 12066 SW 117 CT MIAMI, FL 33186 US FEI Number: 65-0650535 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: O'SULLIVAN, HOWARD 11313 S.W. 165 TERRACE MIAMI, FL 33157 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition DEHRING, ROBERT B Name: Name: 18236 N.W. 6TH STREET Address: Address: City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: Title: Title: () Delete () Change () Addition Name: LEE SIN. ROGER C Name: 11045 S.W. 159TH TERRACE Address: Address: MIAMI, FL 33157 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition DADE, DORTHON Name: Name: 11231 S.W. 181 STREET Address: Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: Title: () Delete Title: () Change () Addition O'SULLIVAN, HOWARD Name: Name: Address: 11313 S.W. 165 TERRACE Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: Title: Title: () Delete () Change () Addition SMITH, PAUL Name: Name: 18800 S.W. 97TH AVE. Address: Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: Title: () Delete Title: () Change () Addition O'SULLIVAN, MARK Name: Name: 11313 S.W. 165 TERRACE Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33157

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAUL SMITH P 04/29/2003