

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000082905

FILED
Jan 06, 2009
Secretary of State

Entity Name: SUPERIOR WHOLESALE PRODUCTS, INC.

Current Principal Place of Business:

10141 USA TODAY WAY
MIRAMAR, FL 33025 US

New Principal Place of Business:

2030 S DOUGLAS RD
209
CORAL GABLES, FL 33133 US

Current Mailing Address:

10141 USA TODAY WAY
MIRAMAR, FL 33025

New Mailing Address:

PO BOX 14-5358
CORAL GABLES, FL 33114

FEI Number: 65-0698660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORTMAN BLOOM & WARFMAN P.A.
MR. LENNY BLOOM
201 S BISCAYNE BLVD # 3000
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: LEONARD BLOOM

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROQUE, ROBERT
Address: 10141 USA TODAY WAY
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROQUE, ROBERT
Address: PO BOX 14-5358
City-St-Zip: CORAL GABLES, FL 33114

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ROBERT ROQUE

PRES

01/06/2009

Electronic Signature of Signing Officer or Director

Date