## \*SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Jul 14, 1999 8:00 am Secretary of State 07-14-1999 90005 017 \*\*\*550.00

SUPERIC	Name OR SPOR	its, inc.					 			
Principal Place of Business  3456 NORTH US 1  VERO BEACH FL 32960  Mailing Address  270 INDIAN HEAD ROAD KINGSPARK NY 11754										
US	L 32300		LYKA	GOFARK NI 11754			DO NOT WRITE	E IN THIS S	SPACE	
							3. Date Incorporated or Qualified			
							01/03/1997			,
2. Principal Place of Business				<b>├</b>			4. FEI Number		-	Applied For
21)			26	<del>-   '                                  </del>			65-0721513	□ \$8.7		Not Applicable  5 Additional
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.			5. Certificate of Status Desired	LJ	·	Required
City & State		<del></del>		City & State			6. Election Campaign Financing		\$53	00 May Be
23			28	<b>,</b>			Trust Fund Contribution		•	ed to Fees
Zip	Ţ	Country		Zip	Cou	ntry	8. This corporation owes the curre	nt year		
24		25	29		30		Intangible Personal Property.			<u>,⊠w</u>
	9. Name	and Address of Curr	ent Registe	ered Agent		81 Name	10. Name and Address of New Re	gistered A	gent	
KRA	MER, ROB	FRT S			ļ	81 Name				
		TEREY ROAD			:	82 Street Addr	ress (P.O. Box Number is Not Acceptat	ole)		_
	ART SSEE					83				
						84 City		FL	85 2	Zip Code
44 Disease 4	to the provin	ione of coctions 607.06	502 and 607	1508 Florida Stat	ites the ab	ove-named corno	pration submits this statement for the pur	nose of cha	naina it	s registered
office or re agent. I at SIGNATURE	egistered ag m familiar w	ent, or both, in the Sta ith, and accept the obl	ite of Florida ligations of,	a. Such change wa section 607.0505,	s authorized Florida Stat	utes.	oration submits this statement for the pur ion's board of directors. I hereby accept	nose of cha	nging iti	s registered s registered
office or re agent. I at	egistered ag m familiar w	ent or both in the Sta	ite of Florida ligations of,	a. Such change wa section 607.0505,	s authorized Florida Stat	utes.	oration submits this statement for the pur ion's board of directors. I hereby accept quired when reinstating)  ADDITIONS/CHANGES TO OFF	pose of cha the appoin	unem a	
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in Block 12 or Block 13 if chair

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