2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000046412

Entity Name: SUPERIOR UNIFORM GROUP, INC

FILED Apr 20, 2005 Secretary of State

Entity Nai	me: SUPERIC	OR UNIFORM GROUP, INC.		
Current Principal Place of Business:			New Principal Place of Business:	
	MINOLE BLVD E, FL 3377225	39		
Current Mailing Address:			New Mailing Address:	
	MINOLE BLVD E, FL 3377225	39		
FEI Number:	: 11-1385670	FEI Number Applied For()	FEI Number Not Applicable	() Certificate of Status Desired ()
Name and	Address of (Current Registered Agent:	Name and Add	ress of New Registered Agent:
10055 SEN	, RICHARD T MINOLE BLVD E, FL 3377225	39 US		
	named entity e of Florida.	submits this statement for the p	ourpose of changing its reg	istered office or registered agent, or both,
SIGNATUR	RE:			
	Electron	nic Signature of Registered Age	ent	Date
Election Car	npaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	EVP (BENSTOCK, P 10055 SEMINO SEMINOLE, FL	LE BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	PD (SCHWARTZ, A 10055 SEMINO SEMINOLE, FL	LE BLVD	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	CEO (BENSTOCK, M 10055 SEMINO SEMINOLE, FL	LE BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	CEO (BENSTOCK, G 10055 SEMINO SEMINOLE, FL	LE BLVD	Address: 1005	(X) Change()Addition STOCK, GERALD M 5 SEMINOLE BLVD INOLE, FL 33772
Title: Name:	CFO (DEMOTT, AND) Delete REW D JR	Title: Name:	() Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: ANDREW D. DEMOTT JR. SR.V.P.,CFO & TREAS.

Address:

10055 SEMINOLE BLVD

City-St-Zip: SEMINOLE, FL 38772

CFO

04/20/2005