2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Jul 20, 2004 8:00 am DOCUMENT # P98000010985 **Secretary of State** 1. Entity Name 07-20-2004 90002 040 ***150.00 SUPERIOR FINANCE CORPORATION OF AMERICA, INC. Principal Place of Business Mailing Address 618 WASHBURN ROAD 618 WASHBURN ROAD 14000101 MELBOURNE FL 32934 MELBOURNE FL 32934 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (4/04) City & State City & State 4. FEI Number Applied For **NO-T APPLICABLE** Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LACINA, KATHY P Street Address (P.O. Box Number is Not Acceptable) 618 WASHBURN ROAD MELBOURNE FL 32934 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 ager (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing \$5.00 May Be late fee. By checking this box, the corporation certifies if DUE BY September 8, 2004 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State did not receive prior notice. Fee to file is \$150.00. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE D ☐ Delete TITLE ☐ Addition NAME LACINA, KATHY P NAME 618 WASHBURN ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MELBOURNE FL 32934 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete* -TITLE - Change → Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete mm e Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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

with all other like empowered.

changed, or on an attachment with an address.

FILED

NONE

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July 12, 2004

Division of Corporations **Annual Report Section** P.O. Box 6850 Tallahassee, FL 32314

Re: SUPERIOR FINANCE CORPORATION OF AMERICA, INC.

Enclosed is a check for \$150 for the annual filing fee for the above referenced corporation.

I did not receive a 2004 1st notice of filing an annual report. After contacting the Florida Dept. of State, I was told to write you a letter explaining the reason no report was filed and ask that you waive the late filing fee.

Thank you for your assistance in this matter.

Sincerely,

Kathy Pihlaja Lacina