

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000013228

FILED
May 30, 2006
Secretary of State

Entity Name: SUPERIOR AUTOMOTIVE MARKETING, INC.

Current Principal Place of Business:

218 N. 2ND ST.
FORT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

218 N. 2ND ST.
FORT PIERCE, FL 34950

New Mailing Address:

FEI Number: 65-0894309

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALVICK, STANLEY J
101 S U.S. HWY 1
FORT PIERCE, FL 34950 US

Name and Address of New Registered Agent:

WALVICK, STANLEY J
218 N 2 ND ST
FORT PIERCE, FL 34950 US

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:

05/30/2006

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: WALVICK, STANLEY
Address: 1724 COCONUT DR
City-St-Zip: FORT PIERCE, FL 34949

Title: V () Delete
Name: WALVICK, CYNTHIA L
Address: 1724 COCONUT DR
City-St-Zip: FORT PIERCE, FL 34949

Title: S () Delete
Name: SEEGER, MANDY L
Address: 8501 NORTH BLVD
City-St-Zip: FT PIERCE, FL 34951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: KINCAID, MANDY L
Address: 8501 NORTH BLVD
City-St-Zip: FT PIERCE, FL 34951

I hereby certify that the information supplied with this filing does not qualify for the 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: MANDY KINCAID

S

05/30/2006

Electronic Signature of Signing Officer or Director

Date