

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000038776

FILED  
Jan 06, 2004  
Secretary of State

Entity Name: SUPER DIVERSIFIED, INC.

## Current Principal Place of Business:

1400 NORTH 29TH COURT  
HOLLYWOOD, FL 33020

## New Principal Place of Business:

## Current Mailing Address:

1400 NORTH 29TH COURT  
HOLLYWOOD, FL 33020

## New Mailing Address:

FEI Number: 65-0915727

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOLLESE, GARY T  
1400 N 29TH CT  
HOLLYWOOD, FL 33020 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: FOLLESE, GARY T  
Address: 1400 NORTH 29TH COURT  
City-St-Zip: HOLLYWOOD, FL 33020

Title: VPD ( ) Delete  
Name: GATES, PAUL R  
Address: 4100 NW 103RD DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP (X) Delete  
Name: ROMERO, RICHARD JR  
Address: 2319 WILSON ST  
City-St-Zip: HOLLYWOOD, FL 33020

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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.

SIGNATURE: GARY T. FOLLESE

PRES

01/06/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date