

Apr 05, 2004 08:00 AM 2004 FOR PROFIT CORPORATION **ANNUAL REPORT** Secretary of State DOCUMENT # P99000039443 1. Entity Name SUPÉRIOR INTERLOCKING PAVING, INC. Principal Place of Business Mailing Address 6301 TAYLOR RD. 6301 TAYLOR RD. NAPLES, FL 34109 NAPLES, FL 34109 03162004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3575340 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **GRIFFIN, DANIEL J DO NOT WRITE** 710 LAKELAND AVE. NAPLES, FL 34110 IN THIS SPACE 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 agent. SIGNATURE_ Signature, typed or printed name of registered agent and sile it applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaion Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 U00000102809 04/05/04-80030-021 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. D DIDE **GRIFFIN, DANIEL J** NAME STREET ADDRESS 710 LAKELAND AVE. NAPLES, FL 34110 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAMP STREET ADDRESS CITY-ST-ZIP TATLE NAME STREET ADDRESS CITY-ST-ZIP WILF NAME STREET ADDRESS CITY-ST-ZP 12. I hereby certify that the information supplier with this filling 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 sustee enpowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with a address, with all other like empowered. SIGNATURE: SIGNATURE AN D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Davtime Phone #

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