2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #

P99000104251



FILED Mar 19, 2003 8:00 am § Secretary of State

| SUPERIOR FOODS INTERNATIONAL, INC. | | | | | | | | 03-1 | 9-2003 9 | 90107 01 | .5 ***150 | 0.00 | |
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| 431 S.W. 178 | ce of Busines ITH WAY PINES FL 3302 | | 431 3 | ng Address S.W. 178TH WAY BROKE PINES FL 330 | 029 | | | | IIII de im ba ik | (80 (8(.)(8)) 8 | NIŁO BIGIO IANA | \$11 4. 110. 12 1. | |
| 2. Principal (1931) Suite, Apt | Place of Busin | 100 64 + H St | reet 19 | illing Address 7319 SW te, Apt, #, etc. | 64 | +H Stree | <u>+</u> | | | | | | |
| Dem. | broke | Pines, F | 1. <u>Pe</u> | mbroke | <u>Pines</u> | , F/. | | | K HERE IF | F MAKING | CHANGES | ; | _ |
| City & Sta | te | | / City | & State | | | 4. FI | El Number 65-0 9 | 968817 | | \vdash | pplied For ot Applicable | ; |
| Zip 3 3 | 332 | Country | Zip | 33332 | Country | / | 5. C | ertificate of Status [| Desired | | \$8.75 Ad Fee Require | | |
| | 6. Name | and Address of Cur | rent Register | ed Agent | | | 7. N | ame and Address | of New Re | gistered A | gent | | ユ |
| POLANCO | o, Jose 178Th Wa | Y | | | | Name Street Addres | ss (P.O. Bo | Number is Not Ac | cceptable) | | | | |
| PEMBRO | KE PINES F | L 33029 | | | | | | | | | | | |
| • | | | | | | City | | | | FL | Zip Cod | le | 1 |
| the obliga | e named entit tions of regist | y submits this stateme ered agent. | ent for the purp | oose of changing its | registered | office or regis | stered age | nt, or both, in the St | tate of Flori | ida. I am fa | amiliar with, | and accept | |
| | | | | | | | | | | | | | |
| SIGNATURE | Signature, typed | or printed name of registered | agent and title if app | plicable. (NOTI | : Registered A | gent signature requ | ired when rein | nstating) | | DATE | | | |
| F Afte | FILE NOW! | or printed name of registered IFEE IS \$150.00 3 Fee will be \$550 Florida Departme |).00 | olicable. (NOTI | : Registered A | gent signature requ | uired when reir | 9. Election Cam Trust Fund Ca | | incing _ | | 00 May Be | |
| F Afte | FILE NOW! | ! FEE IS \$150.00 33 Fee will be \$550 Florida Departme |).00 | | Registered A | gent signature requ | | 9. Election Cam | ontribution. | incing | Adde | d to Fees | |
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #