FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996 4-1-96 B- ~~2999~~ 2883 MC

FLORIDA DEPARTMENT OF STATE

DOCUMENT # S96360 (0)

1. Corporate Name

SUPERIOR UNLIMITED CORP.

Principal Place of Business

30320 S.W. 155TH AVE.
LEISURE CITY FL 33033

Mailing Address

30320 S.W. 155TH AVE.
LEISURE CITY FL 33033

3. Date Incorporated or Qualified: 11/25/1991

3a. Date of Last Report: 03/14/1995

4. FEI Number: 65-0296748 — Applied For / Not Applicable

5. Certificate of Status Desired — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees

8. Is this corporation subject to intangible tax under s. 199.032, Florida Statutes? [X] Yes [ ] No

2. Principal Place of Business — 21 — Suite Apt. #: 22 — City, State: 23 — Zip: 24 — County: 25

2a. Mailing Address — 26 — Suite Apt. #: 27 — City, State: 28 — Zip: 29 — County: 30

9. Name and Address of Current Registered Agent

DIAZ, JORGE
30320 S.W. 155TH AVE.
LEISURE CITY FL 33033

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Section [illegible] Florida Statutes, the undersigned submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The corporation is currently qualified to transact business in Florida. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section [illegible] Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TYPE	PD	[ ] DELETE
NAME	DIAZ, JORGE	
STREET ADDRESS	30320 SW 155 AVE.	
CITY ST ZIP	LEISURE CITY FL	
TYPE	PD	[ ] DELETE
NAME	DIAZ, RAQUEL D.	
STREET ADDRESS	30320 SW 155 AVE.	
CITY ST ZIP	LEISURE CITY FL	
TYPE	PD	[ ] DELETE
NAME	DIAZ, JORGE A.	
STREET ADDRESS	30320 SW 155 AVE.	
CITY ST ZIP	LEISURE CITY FL	
TYPE	PD	[ ] DELETE
NAME	DIAZ, JUAN C.	
STREET ADDRESS	30320 SW 155 AVE.	
CITY ST ZIP	LEISURE CITY FL	
TYPE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		
TYPE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TYPE	[ ] Change	[ ] Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		
TYPE	[ ] Change	[ ] Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		
TYPE	[ ] Change	[ ] Addition
NAME		
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TYPE	[ ] Change	[ ] Addition
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TYPE	[ ] Change	[ ] Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		
TYPE	[ ] Change	[ ] Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		

CR2E034 (12/95)

14. I hereby 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 Section 607.193, Florida Statutes; and that my name appears in Block 12 or Block 13 with an officer or director title.

SIGNATURE: Jorge Diaz — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — President — 3/25/96 — (305)-246-1126