

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 19, 2007 8:00 am
Secretary of State

02-19-2007 90053 036 ***150.00

DOCUMENT # V62437

1. Entity Name

SUPERIOR DESIGN & DRAFTING, INC.



Principal Place of Business

SUPERIOR DESIGN & DRAFT
6322 PRESIDENTIAL CT.
FT. MYERS FL 33919
US

Mailing Address

6322 PRESIDENTIAL CT.
FT. MYERS FL 33919
US



1st MOORE

CR2E034 (10/06)

2. Principal Place of Business - No P.O. Box #

6322 PRESIDENTIAL CT.

Suite, Apt. #, etc.

3. Mailing Address

6322 PRESIDENTIAL CT.

Suite, Apt. #, etc.

City & State

FORT MYERS FL

Zip

33919

Country

USA

City & State

FORT MYERS FL

Zip

33919

Country

USA

4. FEI Number

65-0356589

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KHAN, STEPHEN W
14736 KIMBERLY LANE
FT MYERS FL 33908

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 title, applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing

Trust Fund Contribution. ☐

\$5.00 May Be

Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME KHAN, STEPHEN
STREET ADDRESS 14736 KIMBERLY LANE
CITY- ST- ZIP FORT MYERS FL 33908 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

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CITY- ST- ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

STEPHEN KHAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-7-07-

239-482-4844

Date

Daytime Phone #