2002 UNIFORM BUSINESS REPORT (UBR) A9700000398

DOCUMENT # 1. Entity Name

SUPERIOR TEXAS ASSETS, LTD.

Principal Place of Business

7108 FAIRWAY DRIVE. #130 PALM BEACH GARDENS FL 33418 Mailing Address

7108 FAIRWAY DRIVE. #130 PALM BEACH GARDENS FL 33418 FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



2. Principal Pla	ace of Business	3. Mailing Address			YMAM KARIA KAMAK MWALI MBAKI WALIA WALIA	00 (00100	
Suite, Apt. #		745 US Highway One Suite, Apt. #, etc.			DUE BY MAY 1, 2002		
Suite City & State		Suite 209 City & State		4. FEI Number	65-0776745	Applied For Not Applicable	
Zip	Palm Beach, FL Country		Beach, FI Country	5. Certificate of	f Status Desired	\$8.75 Additional	
33408 U.S.A. 6. Name and Address of Current R		33408 Registered Agent			d Address of New Registered Agent		
7108 FAIR PALM BEA	R, RICHARD WAY DR., #130 ACH GARDEN FL 33418		Street Address (P.O. Box Number is Not Acceptable) 745 US Highway One - Suite 209 North Palm Beach, FL 33408 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.							
SIGNATURE Richard A Heitmeyer OATE Signature, typed or printed name pipeoist reagage and title if applicable.							
9. Capital Cor as Shown o	tributions	10. Amount of Capita		000.00	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION		
as Shown on record. A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.							
12. GENERAL PARTNER INFORMATION			13.	ADDRESS CHANGES ONLY			
DOCUMENT # NAME	SUPERIOR ASSET EQUITY, INC.			745 US Highway One - Suite 209			
STREET ADDRESS CITY-ST-ZIP	7108 FAIRWAY DRIVE, #130 PALM BEACH GARDENS FL 334	4 18	CITY-ST-ZIP	North Palm	Beach, FL 3	3408	
DOCUMENT #			STREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP	7.5			
DOCUMENT #			STREET ADDRESS				
STREET ADDRESS CITY_ST-ZIP			CITY-ST-ZIP	10)0005358 -04/26/020		
DOCUMENT # NAME			STREET ADDRESS		****613.75	****368.75	
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DOCUMENT # NAME			STREET ADDRESS		· .	-4-21-0-17	
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP			12000	
DOCUMENT #			STREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP				

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Heitmeyer 4/17/2 56/-776-1/00