

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003889

FILED
Feb 09, 2009
Secretary of State

Entity Name: SUPERIOR ASSET MANAGEMENT, INC.

Current Principal Place of Business:

BUILDING 400, SUITE 165
1000 ABERNATHY RD, NE,
ATLANTA, GA 30328

New Principal Place of Business:

1000 ABERNATHY RD. NE,
BUILDING 400, SUITE 165
ATLANTA, GA 30328

Current Mailing Address:

1901 WEST 10TH STREET
SUITE B
ANTIOCH, CA 94509

New Mailing Address:

FEI Number: 58-1793524 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

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:

02/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHENG, XIN
Address: 2250 E. TROPICANA AVENUE SUITE 19-246
City-St-Zip: LAS VEGAS, NV 89119

Title: STCF () Delete
Name: NEGI, VIKRAM
Address: 97 E. BROKAW ROAD, SUITE 240
City-St-Zip: SAN JOSE, CA 95112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NEGI, VIKRAM
Address: 1901 WEST 10TH STREET, SUITE B
City-St-Zip: ANTIOCH, CA 94509

Title: STCF (X) Change () Addition
Name: CHENG, XIN
Address: 2250 E. TROPICANA AVENUE SUITE 19-246
City-St-Zip: LAS VEGAS, NV 89119

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VIKRAM NEGI

PRES

02/09/2009

Electronic Signature of Signing Officer or Director

Date