

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90415 002 ***150.00

DOCUMENT # P96000012794

1. Entity Name

SUPERIOR ASSET EQUITY CORPORATION

Principal Place of Business

7108 FAIRWAY DRIVE
STE 130
PALM BEACH GARDENS FL 33418
US

Mailing Address

7108 FAIRWAY DRIVE
STE 130
PALM BEACH GARDENS FL 33418
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0652194

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HEITMEGER, RICHARD
7108 FAIRWAY DR #130
PALM BEACH GARDEN FL 33418

Name

Heitmeyer, Richard

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

7108 Fairway Drive, #130

City

Palm Beach Gardens

FL

Zip Code

33418

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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S
NAME JAUREGUI, CARMEN ☐ Delete
STREET ADDRESS 7108 FAIRWAY DR #130
CITY-ST-ZIP PALM BEACH GARDENS FL 33418

TITLE S
NAME Jauregui, Carmen ☒ Change ☐ Addition:
STREET ADDRESS 7108 Fairway Drive, #130
CITY-ST-ZIP Palm Beach Gardens, FL 33418

TITLE PD
NAME HEITMEYER, RICHARD A ☐ Delete
STREET ADDRESS 7108 FAIRWAY DR #130
CITY-ST-ZIP PALM BEACH GARDENS FL 33418

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

13. 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 11 or Block 12 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 #

1/10/01 561-776-1100

CR2E034 (10/00)