72000 UNIFORM BUSINESS REPORT (UBR) **FILED** Aug 22, 2000 8:00 am Secretary of State **DOCEMENT # F43421** SOUTHEAST MARKETING VENTURES, INC. 08-22-2000 90235 036 ***150.00 Principal Place of Business Mailing Address P.O. BOX 25640: P.O. BOX 25640 FT. LAUDERDALÉ FL 33320 FT. LAUDERDALE FL 33320 3. Mailing Address 2. Principal Place of Business 3411 NW 9 AVENUE 3411 NW 9 Avenuc Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE # 705 # 705 City & State. Applied For 4. FEI Number 59-2115407 t. Lauderdale Lauderdak Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired *33309* 33309 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KERT, ROBIN Street Address (P.O. Box Number is Not Acceptable) 3411 N.W. 9 AVE #705 FT. LAUDERDALE FL 33309 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) `FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition ☐ Change TITLE Delete KERT, ROBIN NAME NAME STREET ADDRESS 3411 NW 9TH AVE #705 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL. 33309 ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP - - Change - Addition . TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition DITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition ☐ Delete TITLE NAME

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 addresser in all other like appowered.

STREET ADDRESS City-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIA NOT SE COL COURED

8 /16 /2000 954-563-WE



August 9, 2000



Division of Corporations
Uniform Business Report Filings
Post Office Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

Enclosed please find our 2000 Corporation Uniform Business report with our check (#18822) in the amount of \$150.00 to cover the filing fees.

We respectfully request this report be accepted as timely filed based on the following reasonable cause:

- ⇒ Previous reports filed on a timely basis
- ⇒ We did not receive the 2000 pre-printed uniform business report due to an address change

We apologize for this oversight.

Respectfully

Robin Kert President

RK/cf enclosure -