

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90024 019 ***150.00

DOCUMENT # S49412

1. Entity Name
SOUTHEAST O.E.M., INC.

Principal Place of Business 2001 WELLS ROAD SUITE A ORANGE PARK FL 32073 US	Mailing Address 2001 WELLS ROAD SUITE A ORANGE PARK FL 32073-2200 US
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2. Principal Place of Business <i>70 Blanding Blvd</i>	3. Mailing Address <i>70 Blanding Blvd</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <i>Orange Park FL</i>	City & State <i>Orange Park FL</i>	4. FEI Number 19-3206491	Applied For <input type="checkbox"/> Not Applicable
Zip <i>32073</i>	Country <i>USA</i>	Zip <i>32073</i>	Country <i>USA</i>



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent BERNSTEIN, CLARK 70 BLANDING BLVD. ORANGE PARK FL 32073	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 *Clark Bernstein* **CLARK BERNSTEIN** DATE **4-17-00**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERNSTEIN, CLARK 70 BLANDING BLVD. ORANGE PARK FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Clark Bernstein* **CLARK BERNSTEIN** DATE **4/17/00** Daytime Phone # **904-272-6970**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)