

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 26, 1999 8:00 am
Secretary of State

02-26-1999 90030 018 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 318573

1. Corporation Name
SOUTHEAST BANKING CORPORATION

Principal Place of Business 200 S BISCAYNE BLVD SUITE 920 MIAMI FL 33131 US	Mailing Address 200 S BISCAYNE BLVD SUITE 920 MIAMI FL 33131 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/01/1967	4. FEI Number 59-1172753	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

2. Principal Place of Business 21 6555 N. POWERLINE RD. Suite, Apt. #, etc. 22 SUITE 408 City & State 23 FT. LAUDERDALE, FL Zip 24 33309 Country 25 BROWARD	2a. Mailing Address 26 6555 N. POWERLINE RD. Suite, Apt. #, etc. 27 SUITE 408 City & State 28 FT. LAUDERDALE, FL Zip 29 33309 Country 30 BROWARD
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9. Name and Address of Current Registered Agent JEFFREY H BECK TRUSTEE FOR SE BANKING CORP 200 S BISCAYNE BLVD SUITE 920 MIAMI FL 33131	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 6555 NORTH POWERLINE ROAD 83 SUITE 408 84 City FORT LAUDERDALE FL 85 Zip Code 33309
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Jeffrey H. Beck Trustee 1/21/99 DATE 1/21/99
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P/ST	<input type="checkbox"/> DELETE	1.1 TITLE BECK, JEFFREY H	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BECK, JEFFREY H		1.2 NAME	
STREET ADDRESS 200 S BISCAYNE BLVD., STE 920		1.3 STREET ADDRESS 6555 N. POWERLINE RD., SUITE 408	
CITY-ST-ZIP MIAMI FL 33131		1.4 CITY-ST-ZIP FORT LAUDERDALE, FL 33309	
TITLE T/DT	<input type="checkbox"/> DELETE	2.1 TITLE BECK, JEFFREY H	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BECK, JEFFREY H		2.2 NAME	
STREET ADDRESS 200 S BISCAYNE BLVD., STE 920		2.3 STREET ADDRESS 6555 N. POWERLINE RD., SUITE 408	
CITY-ST-ZIP MIAMI FL 33131		2.4 CITY-ST-ZIP FORT LAUDERDALE, FL 33309	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jeffrey H. Beck Trustee 1/21/99 DATE 1/21/99 DAYTIME PHONE # 954-764 2828
(NOTE: Registered Agent signature required when reinstating)

CR2E034 (11/98)