

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 437705

FILED  
Jan 04, 2005  
Secretary of State

Entity Name: SOUTHEAST REALTY CORP.

**Current Principal Place of Business:**

4780 N. STATE ROAD 7 #E250  
E250  
LAUDERDALE LAKES, FL 33319 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 290156  
DAVIE, FL 333290156 US

**New Mailing Address:**

FEI Number: 59-1538185      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KARP, NEIL  
1801 SATINWOOD CIR  
COCONUT CREEK, FL 33066 US

**Name and Address of New Registered Agent:**

KARP, NEIL  
PO BOX 290156  
DAVIE, FL 33329 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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/04/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KARP, HARRY,  
Address: 1801 SATINWOOD CIRCLE  
City-St-Zip: COCONUT CREEK, FL

Title: TST ( ) Delete  
Name: KARP, JASON  
Address: P.O. BOX 290156  
City-St-Zip: DAVIE, FL 33329

Title: VP ( ) Delete  
Name: WILLIFORD, WILLIAM  
Address: PO BOX 290156  
City-St-Zip: DAVIE, FL 33329

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JASON KARP

Electronic Signature of Signing Officer or Director

TST

01/04/2005

Date