2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 686978

FILED Jan 08, 2008 Secretary of State

Entity Name: SOUTHEASTERN EXCAVATING, INC.

Current Principal Place of Business:		New Principal Place of Business:		
TE 3000	ATIS STREET LM BEACH, F			
urrent M	lailing Addre	ss:	New Mailing Address	s:
O BOX 1 OXAHAT	372 CHEE, FL 33	470 US		
El Number	: 59-2027375	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	Address of (Current Registered Agent:	Name and Address o	of New Registered Agent:
CHOVER	NING SCOT	Т		
OXAHAT he above	H ST, N CHEE, FL 33	470 US	e purpose of changing its registere	d office or registered agent, or both,
he above	H ST, N CHEE, FL 33 named entity of Florida.	470 US	e purpose of changing its registere	d office or registered agent, or both,
OXAHAT he above ı the State	H ST, N CHEE, FL 33 named entity of Florida.	470 US		ed office or registered agent, or both, Date
OXAHAT he above i the State	H ST, N CHEE, FL 33 named entity of of Florida. RE: Electron	470 US submits this statement for th		
OXAHAT The above the State SIGNATUE	H ST, N CHEE, FL 33 named entity of of Florida. RE: Electron	submits this statement for the nic Signature of Registered Ang Trust Fund Contribution ().	Agent	
OXAHAT The above the State GNATUE	H ST, N CHEE, FL 33 named entity of Florida. RE: Electrol mpaign Financin S AND DIREC	submits this statement for the nic Signature of Registered Ang Trust Fund Contribution (). CTORS:) Delete BARY TIN	Agent	Date
OXAHAT The above The State GRATUI Jection Car DFFICER: title: ame: ddress:	H ST, N CHEE, FL 33 named entity of Florida. RE: Electron mpaign Financin S AND DIREC V (TRZEPACZ, G, 15539 41ST C LOXAHATCHE	submits this statement for the nic Signature of Registered Ang Trust Fund Contribution (). CTORS:) Delete ARY TN EE, FL 33470) Delete G, SCOTT T, N	Agent ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SCOTT SCHOVERLING P 01/08/2008