## FILE NOW: FILING FEE AFTER MAY 1 IS \$650.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 694840

(0)

SOUTHEAST STEVEDORE, INC.

FILED
Feb 25 1997 8:00am
Secretary of State
Berd birin lakke beldê serin birin bark birin bêlêk birke birke birke birkê birêkê birêkê birêkê

21 59-2114419	Applied For Not Applicable
2. Principal Place of Business       2a. Mailing Address       4. FEI Number         21       26       59-2114419	Applied For Not Applicable
Suite, Apt. #, etc. 5.415. Suite. Suite. \$8.75	k Additional
27 5. Certificate of Status Desired Fee	Required
	May Be
Zip   Country   Zip   Country   Zip   Country   S. This corporation has liability for intangible tax under	d to Fees s. 199.032.
24 25 29 30 Florida Statutes Yes No	
Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent	
FOLEY JOHN F   81   Name	
701 SE 24TH ST  82 Street Address (P.O. Box Number is Not Acceptable)	
FT LAUDERDALE FL 33316	
	- 0- 4-
.   84   City   FL   85   Zi	p Code
11. Pursuant to the provisions of Sections 607 0002 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing 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	its registered
office or registered agent, or both, in the state of Florida. Such change was authorized by the corporation's board of directors. Finereby accept the appointment agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	as registered
SIGNATURE	
Stgriating typed or parties name of registered agont and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE	250 1140
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR DIRECTOR 1.1 TITLE Change	
PALMY IAMAG	8 Audition
TALLOW AUTHOR	
ET LAUDEDDALE EL	
CHY-SI-ZIP	e
NAME HVIDE, HANS J 22 NAME	
STREET ADDRESS 701 SE 24TH ST 23 STREET ADDRESS	
CHY-SI-ZIP FT LAUDERDALE FL 2.4 CHY-ST-ZIP	
TITLE P DELETE 3.1 TITLE D.P	e 🔲 Addition
NAME NOVACEK, ARTHUR C. 3.2 NAME	
STREET ADDRESS 701 SE 24TH ST 33 STREET ADDRESS	
CHY-ST-ZIP FT LAUDERDALE FL 3.4. CHY-ST-ZIP	
TITLE DELETE 4.1 TITLE Chang	e Addition
NAME 4.2 NAME	
STHEET ADDRESS 4.3 STREET ADDRESS	
C-TY - S1 - Z/P 4.4 C/TY - ST - Z/P	
TOLE DELETE 5.1 TITLE Chang	e Addition
NAME 5.2 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
C1TY - S1 - 71P 5.4 C TY - ST - 71P	
TITLE DELETE 6.1 TITLE Chang	e Addition
N≥M€ . 6.2 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
City St-7/P 6.4 City-St-7/P 6.4 City-St-7/P 6.4 City-St-7/P 14. Let a bready certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3Vi). Florida Statutes. I further certify the	

4. I do 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 Bipsk 13 if changed, or on an attachment with an address.

SIGNATURE:

1/10/96 (954) 525-3381