

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #696298

REINSTATEMENT

1. Corporation Name

Southeast U.S.A., Inc.

Principal Place of Business

34080 N. Tamiami Trail
Bonita Springs, FL 33932 US

Mailing Address

P.O. Box 6078
Ft. Myers Beach, FL 33952

REINSTATEMENT 9-7-99

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/28/1981

4. FEI Number

59-2157314

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes

☐

No

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

28

Zip

Country

30

33932

9. Name and Address of Current Registered Agent

Frances M. Gatzjens
3040 Estero Blvd.
Ft. Myers Beach, FL 33931 US

10. Name and Address of New Registered Agent

81 Name

Garey F. Butler

82 Street Address (P.O. Box Number is Not Acceptable)

1625 Hendry Street, Suite 301

83

84 City

Fort Myers

85

Zip Code

FL

33901

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 Garey F. Butler

GAREY F. BUTLER

DATE 2/26/99

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

P/D

☐ DELETE

NAME

Scialdone, Anthony

STREET ADDRESS

3040 Estero Blvd.

CITY-ST-ZIP

Ft. Myers Beach, FL 33931

TITLE

V/D

☐ DELETE

NAME

Russo, Alfredo

STREET ADDRESS

3040 Estero Blvd.

CITY-ST-ZIP

Ft. Myers Beach, FL 33931

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

1000002795221--6

-03/05/99--01005--005

***1050.00 ***1050.00

☐ Change

☐ Addition

☐ Change

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☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alfredo Russo

2-25-99

941-463-2600

CR2E034 (11/98)