

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 MAY 10 PM 3:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 853341 (6)

1. Corporation Name

SECO EAST COAST, INC.

Principal Place of Business

2800 VETERANS BLVD STE 330
METAIRIE LA 70002

Mailing Address

2800 VETERANS BLVD STE 330
METAIRIE LA 70002

2. Principal Place of Business

21 Three Lakeway; 3838 N. Causeway Blvd. (Same)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 2200

27

City & State

City & State

23 Metairie, LA

28

Zip

Country

Zip

Country

24 70002

25

U.S.A.

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

3. Date Incorporated or Qualified

07/01/1982

3a. Date of Last Report

05/31/1995

4. FEI Number

72-0627047

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

400001827004

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

95/13/96-01067-014

83

84 City

FL

85 Zip Code

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

Signature of Registered Agent or Secretary of State

Signature of Registered Agent or Secretary of State

Date

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME D DAERR, RICAHRD
STREET ADDRESS 5200 CEDAR CREST BLVD
CITY-ST-ZIP HOUSTON TX

TITLE ☒ DELETE
NAME PD FRANK L CALANDRO
STREET ADDRESS 9625 ROBIN LANE
CITY-ST-ZIP RIVER RIDGE LA

TITLE ☐ DELETE
NAME DS TUSA, DAVID
STREET ADDRESS 16318 ACAPULCO DR
CITY-ST-ZIP HOUSTON TX

TITLE ☒ DELETE
NAME V ISBELL, THOMAS E
STREET ADDRESS 107 E RUELLE
CITY-ST-ZIP MANDEVILLE LA

TITLE ☐ DELETE
NAME T SOLIS, H. PAT
STREET ADDRESS 5200 CEDAR CREST BLVD
CITY-ST-ZIP HOUSTON TX

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Vice-President ☐ Change ☒ Addition
1.2 NAME Steve R. Pierce
1.3 STREET ADDRESS 3800 Grand Lake Blvd., #K102
1.4 CITY-ST-ZIP Kenner, LA 70065

2.1 TITLE President ☒ Change ☐ Addition
2.2 NAME James J. Degnan
2.3 STREET ADDRESS 3800 Grand Lake Blvd., #A106
2.4 CITY-ST-ZIP Kenner, LA 70065

3.1 TITLE Director ☒ Change ☐ Addition
3.2 NAME David Tusa
3.3 STREET ADDRESS 16318 Acapulco Dr.
3.4 CITY-ST-ZIP Houston, TX 77040

4.1 TITLE Secretary & Director ☐ Change ☒ Addition
4.2 NAME Frank Perrone
4.3 STREET ADDRESS 5200 Cedar Crest Blvd.
4.4 CITY-ST-ZIP Houston, TX 77087

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(c), 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 it made under oath, that I am an officer or director of the corporation or the receiver or trustee or person 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 appointment with an address.

SIGNATURE:

Signature and Typed or Printed Name of Signing Officer or Director

Steve R. Pierce

5/6/96

(504) 834-8100

CR2E034 (12/95)