

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Sep 09 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F96000002485 (8)**

1. Corporation Name

**SOUTHEAST RESIDENTIAL CORP.**



Principal Place of Business <b>120 WOOSTER ST., 6TH FL. NEW YORK NY 10012</b>	Mailing Address <b>120 WOOSTER ST., 6TH FL. NEW YORK NY 10012</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**05/16/1996**

4. FEI Number

**13-3842280**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No **N/A**

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

**JUBELT, PAUL C  
% AFFIRMATIVE MANAGEMENT, INC.  
5850 T.G. LEE BLVD., SUITE 300  
ORLANDO FL 32822**

10. Name and Address of New Registered Agent

81 Name **JUBELT, PAUL C**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**% AFFIRMATIVE MANAGEMENT, INC.**  
83 **5850 T.G. LEE BLVD, SUITE 345**  
84 City **ORLANDO** FL 85 Zip Code **32822**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>JUBELT, ANDREW D</b>	1.2 NAME	
STREET ADDRESS	<b>120 WOOSTER ST., 6TH FL.</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>NEW YORK NY 10012</b>	1.4 CITY-ST-ZIP	
TITLE	S	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BENDER, ARIADNE A</b>	2.2 NAME	
STREET ADDRESS	<b>120 WOOSTER ST., 6TH FL.</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>NEW YORK NY 10012</b>	2.4 CITY-ST-ZIP	
TITLE	T	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HARVATIN, JOHN</b>	3.2 NAME	
STREET ADDRESS	<b>120 WOOSTER ST., 6TH FL.</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>NEW YORK NY 10012</b>	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE:

*[Signature]*

**8/27/98 212-925-9600**

CR2E034 (5/98)