2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2007 8:00 am
Secretary of State
01-08-2007 90252 030 ***150.00

DOCUMENT # G11514

1. Entity Name
SOUTHEAST ACCOUNTING AND TAX GROUP INC.

Principal Place of Business	Mailing Address
~~713 EAST ATLANTIC BLVD~~ ~~POMPANO BEACH, FL 33060-6345 US~~	~~713 EAST ATLANTIC BLVD~~ ~~POMPANO BEACH, FL 33060-6345 US~~

01042007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
440 N.W. 11TH AVE	440 N.W 11TH AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: BOCA RATON FL	City & State: BOCA RATON FL
Zip: 33486 Country: PALM BEACH	Zip: 33486 Country: PALM BEACH

4. FEI Number 59-2237670 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

JACOBSEN, PETER
~~713 EAST ATLANTIC BLVD~~
~~POMPANO BEACH, FL 33060~~-6345

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable) 440 N.W 11TH AVE

City BOCA RATON **FL** Zip Code 33486

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________________
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	PDT JACOBSEN, PETER ~~713 EAST ATLANTIC BLVD~~ ~~POMPANO BEACH, FL 330606345~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☒ Change ☐ Addition 440 N.W 11TH AVE BOCA RATON FL 33486
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	SD JACOBSEN, BEVERLY ~~713 EAST ATLANTIC BLVD.~~ ~~POMPANO BEACH, FL 330606345~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☒ Change ☐ Addition 440 NW 11TH AVE BOCA RATON FL 33486
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] PETER JACOBSEN 1/4/07 (561) 392-9921
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #