FILE NOW: FILING FEE AFTER MAY 1, 18 \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

(6)

DOCUMENT # 1. Corporation Name SOUTHEAST REALTY INVESTMENTS CORPORATION

SOUTHEAST HEALTY INVESTMENTS CORPORATION											
Principal Place of	f Business	M	alling Address				1 (88/5// 88// 8/8// 8/// 8///				
% NIKKI J NEDBOR 1221 BRICKELL AVENUE. #2500			% NIKKI J NEDBOR 1221 BRICKELL AVENUE. #2500								
MIAMI FL 33131 MIAMI FL 33131							3. Date Incorporated or Qualified 06/24/1983 3a. Date of Last Report 04/27/1995			95	
2. Principal Plac	e of Business	2a.	Mailing Address				4. FEI Number			pplied For	
1		26					59-2314661			lot Applicable	
Suite, Apt. #,	Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State			City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
3 Zip	Country		Zip	Cou	intry		8. This corporation has liability for	intangible:	tax under s	199.032,	
4	25 29		30				Florida Statutes				
	9. Name and Address of Curren	t Regi	stered Agent		81	Name	10. Name and Address of New I	egisteret			
					•						
NEDBO	R, NIKKI J				82	Street Addre	ess (P.O. Box Number is Not Acceptal	ole)			
1221 BRICKELL AVENUE			83								
+SUITE 2					"						
-MIAM! F	FL 33131				84	City		FI	85 Zip	o Code	
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AN			OTE: Registero	d Age	nt signature recjulius	d when reinstating ADDITIONS/CHANGES TO OF	DATE FICERS AN			
TITLE	PD		☐ DELETE	1. 1	TITLE				Change	Addition	
NAME	CAMNER, ALFRED R.				NAME						
STREET ADDRESS	1221 BRICKELL AVE #2500)				I ADDRESS					
CITY-ST-ZIP	MIAMI FL		☐ DELETE		TITLE	ST-ZIP			Change	Addition	
TITLE	VST		LJ breen		NAMÉ						
NAME OTOS: 1 ADDDESS	FORD, EARLINE G. 1221 BRICKELL AVE #250	n				1 ADDRESS					
STREET ADDRESS CITY-ST-ZIP	MIAMI FL					ST - 21P					
TITLE	VAS	··-	□ ĐĒLĒTĒ		THLE				☐ Change	☐ Addition	
NAME	NEDBOR, NIKKI J.			3.2	NAME		·				
STREET ADDRESS	1221 BRICKELL AVE #250	0		33	STREE	et address					
CITY-ST-2IP	MIAMI FL		FT DELET			ST-ZIP			Change	Addition	
TITLE	V		DETEIF		TITLE				C Guanda	L.,	
NAME	CAMNER, ANNE S.				NAME		7000018	112	107		
STREET ADDRESS	1221 BRICKELL AVE #250	U				T ADDRESS	-05/07/9601				
CITY-ST-ZIP	MIAMI FL		[] DELETE		TILLE	ST-7IP	***200.00		Change	Addition	
TITLE					NAME	i					
NAME STREET ADDRESS						T ADDRESS					
CITY-ST-ZIP				5.4	CITY-	ST-ZIP				70	
TITLE			☐ DELETE		1 TiTLE				☐ Channe	Addition	
NAME				. 62	NAM					\cdot	
STREET ADDRESS				6.3	STRE	ET ADURESS			61	イー・	
CITY-ST-ZIP	, -					- \$1 - ZIP	for the exemption stated in Castion 1:	ומ האוצוועו	Florida Stati	ites. I further	
14 Ldo beret	Loy certify that the information supplied to the information indicated on this and Lam an officer or director of the corp Block 12 or Block 13 if changes, or	l with t nual rep poration on an	his filing is voluntarily fu port or supplemental ar nor the receiver or trus attachment with an ac	urnished an	id do	es not qualify	for the exemption stated in Section 1 rate and that my signature shall have t his report as required by Chapter 607,	9.07(3)(k), ne same le Florida Sta	Florida Statu gal effect as atutes; and the	ites. I further if made und nat my name	

SIGNATURE AND TYPED OR PRIVED NAME OF SIGNING OFFICE OR DIRECTOR NIKI T. NEDBOR. VICE PRESIDENT

305/577-0600

Daytime Phone #