

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

CORPORATION
ANNUAL REPORT
1995



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

**APPROVED
AND
FILED**

MAY 23 11:10:15

FLORIDA
TALLAHASSEE, FLORIDA

DOCUMENT # **G94810** (0)

1. Corporation Name

SOUTHEASTERN INDUSTRIAL ENGINEERING, INC.

Physical Place of Business

**401 LAKE SHORE DRIVE
SUITE 403
LAKE PARK FL 33403**

Mailing Address

**401 LAKE SHORE DRIVE
SUITE 403
LAKE PARK FL 33403**

[Do Not Write in This Space]

2. Physical Place of Business:

21

Date: April 8, 1995

2a. Mailing Address

26

Date: April 8, 1995

22

City & State

27

City & State

23

Country

28

Country

24

Zip

29

Zip

30

3. Date Incorporated or Organized **04/05/1984** 36. Date of Last Report **04/15/1994**

4. EIN Number **95-2390873** Applied For Not Applicable

5. Certificate of Status (Fees) **\$0.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

7. Other Corporation Information: I, the undersigned, have read G. 1000.00 Florida Statutes Yes No

9. Name and Address of Current Registered Agent

81. Name

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

83.

84. City

FL 85. Zip Code

11. Pursuant to the provisions of Laws 140, 140A, and 140C, Florida Statutes, the above named corporation appoints the individual in the position of chairman of its registered office to receive reports or notices 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 the sole officer and director of the corporation. (See Section 100 of the Florida Statutes.)

5-15-95

RUGABER, RICHARD M.
PD
RUGABER, RICHARD M.
401 LAKE SHORE DR #403
LAKE PARK FL

RUGABER, RUTH F.
VD
RUGABER, RUTH F.
401 LAKE SHORE DR #403
LAKE PARK FL

12. OFFICER AND DIRECTORS 13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (If any)

NAME	1. NAME	2. NAME	3. NAME	4. NAME	5. NAME
ADDRESS	1. ADDRESS	2. ADDRESS	3. ADDRESS	4. ADDRESS	5. ADDRESS
POSITION	1. POSITION	2. POSITION	3. POSITION	4. POSITION	5. POSITION
TYPE	1. TYPE	2. TYPE	3. TYPE	4. TYPE	5. TYPE
100	1. 100	2. 100	3. 100	4. 100	5. 100
100A	1. 100A	2. 100A	3. 100A	4. 100A	5. 100A
100B	1. 100B	2. 100B	3. 100B	4. 100B	5. 100B
100C	1. 100C	2. 100C	3. 100C	4. 100C	5. 100C
100D	1. 100D	2. 100D	3. 100D	4. 100D	5. 100D
100E	1. 100E	2. 100E	3. 100E	4. 100E	5. 100E
100F	1. 100F	2. 100F	3. 100F	4. 100F	5. 100F
100G	1. 100G	2. 100G	3. 100G	4. 100G	5. 100G
100H	1. 100H	2. 100H	3. 100H	4. 100H	5. 100H
100I	1. 100I	2. 100I	3. 100I	4. 100I	5. 100I
100J	1. 100J	2. 100J	3. 100J	4. 100J	5. 100J
100K	1. 100K	2. 100K	3. 100K	4. 100K	5. 100K
100L	1. 100L	2. 100L	3. 100L	4. 100L	5. 100L
100M	1. 100M	2. 100M	3. 100M	4. 100M	5. 100M
100N	1. 100N	2. 100N	3. 100N	4. 100N	5. 100N
100O	1. 100O	2. 100O	3. 100O	4. 100O	5. 100O
100P	1. 100P	2. 100P	3. 100P	4. 100P	5. 100P
100Q	1. 100Q	2. 100Q	3. 100Q	4. 100Q	5. 100Q
100R	1. 100R	2. 100R	3. 100R	4. 100R	5. 100R
100S	1. 100S	2. 100S	3. 100S	4. 100S	5. 100S
100T	1. 100T	2. 100T	3. 100T	4. 100T	5. 100T
100U	1. 100U	2. 100U	3. 100U	4. 100U	5. 100U
100V	1. 100V	2. 100V	3. 100V	4. 100V	5. 100V
100W	1. 100W	2. 100W	3. 100W	4. 100W	5. 100W
100X	1. 100X	2. 100X	3. 100X	4. 100X	5. 100X
100Y	1. 100Y	2. 100Y	3. 100Y	4. 100Y	5. 100Y
100Z	1. 100Z	2. 100Z	3. 100Z	4. 100Z	5. 100Z

14. I declare, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 100.01(2)(d), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect and made under oath that I am an officer or director of the corporation or the owner or trustee empowered to execute this report as required by Chapter 100, Florida Statutes, and that my name appears on Block 1a or Block 1b changed, or in any attachment with an address.

SIGNATURE:

RUGABER, RICHARD M.

NATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-15-95 **407 844-2037**

Telephone #

0243610 CP