FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
95 APR 17 PM 1:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H98666 (1)

1. Corporation Name
SOUTHEAST BUSINESS INVESTMENT CORP.

Principal Place of Business	Mailing Address
~~5350 CANAL DRIVE~~ ~~LAKE WORTH FL 33463~~	~~5350 CANAL DRIVE~~ ~~LAKE WORTH FL 33463~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/11/1986
3a. Date of Last Report: 01/21/1994

2. Principal Place of Business
21: 112 S. FEDERAL HWY
22 Suite, Apt. #, etc.: SUITE 6
23 City & State: BOYNTON BEACH, FL
24 Zip: 33435
25 Country: PALM BEACH

2a. Mailing Address
26: P.O. BOX 1388
27 Suite, Apt. #, etc.:
28 City & State: BOYNTON BEACH, FL
29 Zip: 33425
30 Country: PALM BEACH

4. FEI Number: NOT APPLICABLE ☐ 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

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

~~MILES, RAYMOND C.~~
~~5350 CANAL DRIVE~~
~~LAKE WORTH FL 33463~~

10. Name and Address of New Registered Agent

81 Name: MILES, RAYMOND C.
82 Street Address (P.O. Box Number is Not Acceptable): 8041 ABERDEEN DR., #202
83:
84 City: BOYNTON BEACH FL 85 Zip Code: 33437

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: Raymond C. Miles — 4-11-95
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	PD	1.1 TITLE	PD ☒ Change ☐ Addition
NAME	MILES, RAYMOND C.	1.2 NAME	MILES, RAYMOND C.
STREET ADDRESS	~~5350 CANAL DR~~	1.3 STREET ADDRESS	8041 ABERDEEN DR, #202
CITY-ST-ZIP	~~LAKE WORTH FL~~	1.4 CITY-ST-ZIP	BOYNTON BEACH, FL 33437
TITLE	D	2.1 TITLE	D ☒ Change ☐ Addition
NAME	MACKENZIE, THERESA	2.2 NAME	MACKENZIE, THERESA
STREET ADDRESS	~~9 QUINCY CLOSE~~	2.3 STREET ADDRESS	2661 SW 23RD CRANBROOK DR,
CITY-ST-ZIP	~~RIDGEFIELD CT~~	2.4 CITY-ST-ZIP	BOYNTON BEACH, FL 33436
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(k), 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: Raymond C. Miles — RAYMOND C. MILES 4-11-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Daytime Phone #

407-732-4304

G97000 CP