

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006415

FILED  
Feb 19, 2007  
Secretary of State

Entity Name: SOUTHEAST UNIVERSITY INC.

## Current Principal Place of Business:

15220 NW 7TH STREET  
PEMBROKE PINES, FL 33028

## New Principal Place of Business:

12921 SW 30 TH STREET  
MIRAMAR, FL 33027

## Current Mailing Address:

15220 NW 7TH STREET  
PEMBROKE PINES, FL 33028

## New Mailing Address:

12921 SW 30 TH STREET  
MIRAMAR, FL 33027

FEI Number: 65-1085622

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RESTREPO, WILLIAM  
15220 NW 7TH STREET  
PEMBROKE PINES, FL 33028 US

## Name and Address of New Registered Agent:

RESTREPO, WILLIAM  
12921 SW 30 TH STREET  
MIRAMAR, FL 33027 US

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.

SIGNATURE: WILLIAM RESTREPO

02/19/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: RESTREPO, WILLIAM  
Address: 2103 CORAL WAY STE 305  
City-St-Zip: MIAMI, FL 33145

Title: D ( ) Delete  
Name: GIRALDO, WILLIAM  
Address: 2103 CORAL WAY STE 305  
City-St-Zip: MIAMI, FL 33145

Title: D ( ) Delete  
Name: CARDONA, GABRIEL JAIME  
Address: 2103 CORAL WAY STE 305  
City-St-Zip: MIAMI, FL 33145

Title: D ( ) Delete  
Name: ALVAREZ, CARLOS  
Address: 2103 CORAL WAY STE 305  
City-St-Zip: MIAMI, FL 33145

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM RESTREPO

PRES

02/19/2007

Electronic Signature of Signing Officer or Director

Date