

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 OCT 27 AM 10:37

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # P01000030990 2003  
1. Entity Name  
Southeast Consolidated Ad, Inc.



**DO NOT WRITE IN THIS SPACE**

**REINSTATEMENT 03**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
417 Leslie Drive  
Suite, Apt. #, etc.

3. Mailing Address  
417 Leslie Drive  
Suite, Apt. #, etc.

City & State  
Hallandale, Florida

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Hallandale, Florida

4. FEI Number Applied For  
Not Applicable

Zip 33009 Country USA

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5. Certificate of Status Desired  \$8.75 Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name Steven Mishkin  
Street Address (P.O. Box Number is Not Acceptable)  
417 Leslie Drive  
City Hallandale FL Zip Code 33009

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 \_\_\_\_\_ DATE 10/27/03--01126--009 \*\*150.00

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

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Florida Department of State

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

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P,D Steven Mishkin 417 Leslie Dr., Hallandale, FL 33009
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_ DAYTIME PHONE # \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)

10/30

October 10, 2003

Florida Department of State  
Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32134  
Corporate Reinstatement

Reference: Southeast Consolidated Ad, Inc. Doc # P01000030990  
2003 Corporation Profit Annual Report

Taxpayer's Assistance:

We would like to have the above corporation annual report filed. We had moved and never received our corporation annual report. After calling the Florida Department of State we were instructed to write this letter and mail it with our report and a check in the amount of \$150.00. We are enclosing our check in the amount of \$150.00 and our corporation annual report for the year 2003.

Thanking you in advance for your cooperation and assistance.

Sincerely yours,  
Southeast Consolidated Ad, Inc.



Steven Mishkin  
President