

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000082923

FILED
May 01, 2004
Secretary of State

Entity Name: SOUTHEAST MANAGEMENT GROUP, INC.

Current Principal Place of Business:

2330 SW 35TH PLACE A-2
GAINESVILLE, FL 32608

New Principal Place of Business:

1857 WELLS RD.
#230
ORANGE PARK, FL 32073

Current Mailing Address:

350 CROSSING BLVD #1304
ORANGE PARK, FL 32073

New Mailing Address:

1857 WELLS RD.
230
ORANGE PARK, FL 32073

FEI Number: 65-1132301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUGHAL, KHALID
2330 SW 35TH PLACE A-2
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

MUGHAL, KHALID
1857 WELLS RD.
230
ORANGE PARK, FL 32073 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: KHALID MUGHAL

05/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MUGHAL, KHALID
Address: 350 CROSSING BLVD #1304
City-St-Zip: ORANGE PARK, FL 32073

Title: D () Delete
Name: SALEM, ADEL
Address: 350 CROSSING BLVD #1304
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MUGHAL, KHALID
Address: 1857 WELLS RD SUITE # 230
City-St-Zip: ORANGE PARK, FL 32073

Title: D (X) Change () Addition
Name: SALEM, ADEL
Address: 1857 WELLS RD SUITE # 230
City-St-Zip: ORANGE PARK, FL 32073

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KHALID MUGHAL

PD

05/01/2004

Electronic Signature of Signing Officer or Director

Date