

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000021824

FILED
Apr 17, 2004
Secretary of State

Entity Name: SOUTHEAST COMMERCIAL GROUP INC.

Current Principal Place of Business:

1835 E HALLANDALE BEACH BLVD #375
HALLANDALE, FL 33009

New Principal Place of Business:

2383 DAVIS BLVD
NAPLES, FL 34104

Current Mailing Address:

1835 E HALLANDALE BEACH BLVD #375
HALLANDALE, FL 33009

New Mailing Address:

151 N. NOB HILL ROAD
#270
PLANTATION, FL 33324

FEI Number: 42-1578497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CONNOLLY, DAVID
1835 E HALLANDALE BEACH BLVD #375
HALLANDALE, FL 33009

Name and Address of New Registered Agent:

CONNOLLY, DAVID DIR
151 N. NOB HILL ROAD
#270
PLANTATION, FL 33324

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: DAVID CONNOLLY

04/17/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CONNOLLY, DAVID
Address: 1835 E HALLANDALE BEACH BLVD #375
City-St-Zip: HALLANDALE, FL 33009

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CONNOLLY, DAVID
Address: 151 N. NOB HILL ROAD #270
City-St-Zip: PLANTATION, FL 33324

Title: VP () Change (X) Addition
Name: CONNOLLY, DANIEL VP
Address: 880 NW 111 AVENUE
City-St-Zip: PLANTATION, FL 33324

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: DAVID CONNOLLY

D

04/17/2004

Electronic Signature of Signing Officer or Director

Date