2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000068446

Entity Name: SOUTHEAST HOSPITALITY CORPORATION

FILED Mar 05, 2007 Secretary of State

y		TOT TOOL IT ZELL TOOK OR	, (III)			
Current P	rincipal Place	of Business:	New Principal Place of Business:			
	BREEZE BLVD JDERDALE, FL					
Current Mailing Address:			New Mailing Address:			
	BREEZE BLVD JDERDALE, FL					
FEI Number	: 57-1176104	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate o	f Status Desired ()
Name and	l Address of C	urrent Registered Agent:	Name and	Address of	New Registe	ered Agent:
	BHAKTA BREEZE BLVD JDERDALE, FL					
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing	its registered	office or regis	stered agent, or both,
SIGNATU	RE:					
	Electron	ic Signature of Registered Age	ent		Dat	e
Election Car	mpaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR			
Title: Name: Address: City-St-Zip:	BHAKTA, RAVI 1222 SEABREE	Delete ZE BLVD DALE, FL 33316	Title: Name: Address: City-St-Zip:	() Change () A	ddition
Title: Name: Address: City-St-Zip:	VP () BHAKTA, BHAR 18 FITCHBURG AYER, MA 014	ROAD	Title: Name: Address: City-St-Zip:	VP (X BHAKTA, BHA 449 WILSON (CLINTON, MA	ST	Addition
Title: Name: Address: City-St-Zip:	VP () BHAKTA, VITTH 18 FITCHBURG AYER, MA 014:	ROAD	Title: Name: Address: City-St-Zip:	VP () BHAKTA, VITT 449 WILSON CLINTON, MA	ST	Addition
Title: Name: Address: City-St-Zip:	BHAKTA, SUDH 1222 SEABREE		Title: Name: Address: City-St-Zip:	() Change ()A	ddition
Title: Name: Address:	TREA () BHAKTA, BHAR 18 FITCHBURG		Title: Name: Address:	TREA () BHAKTA, BHA 449 WILSON		Addition

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip: CLINTON, MA 01510

SIGNATURE: RAVI D BHAKTA P 03/05/2007

City-St-Zip: AYER, MA 01432