


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2007 8:00 am
Secretary of State

05-08-2007 90010 034 ***150.00

DOCUMENT # P04000099427	
1. Entity Name UNITED PROPERTIES OF SOUTH EAST FLORIDA, INC.	

Principal Place of Business 6627 FOREST HILL BLVD. WEST PALM BEACH, FL 33413	Mailing Address 6627 FOREST HILL BLVD. WEST PALM BEACH, FL 33413
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DO NOT WRITE IN THIS SPACE

40108017



04282007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1215807	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GOUBRAN, NADER 6507 65TH WAY 217 Gazette Way WEST PALM BEACH, FL 33413
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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 _____	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST GOUBRAN, NADER 6507 65TH WAY 217 Gazette Way WEST PALM BEACH, FL 33409 WPB FL 33413
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V LOUKA, YVETTE 6507 65TH WAY 217 Gazette Way WEST PALM BEACH, FL 33409 WPB FL 33413
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: <u>Yvette Louka</u>	<u>4-28-07</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #