P0600010 9489

·				
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

APPROVEU AND FILED

R.A. Charge

C. Coulilette OCT 2 6 2007



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 18, 2007

SOUTH EASTERN EXPRESS INC 18350 NW 2 AVE SUITE 401-A MIAMI, FL 33169

SUBJECT: SOUTH EASTERN EXPRESS INC

Ref. Number: P06000109489

Our records indicate the registered agent for the above named corporation resigned on September 28, 2007 and that the corporation currently does not have a registered agent designated.

Chapter 607/617, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a corporation for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named corporation 60 days from the date of this letter if a registered agent is not properly designated.

Please designate a new registered agent by doing one of the following: 1) complete the enclosed registered agent designation form, 2) file the current year annual report (if applicable) or 3) file an amended annual report (again, if applicable). Each one of these filings must be submitted with the appropriate filing fee.

If you should need any further information, please contact our office at (850) 245-6050.

Carol Mustain Regulatory Specialist II Division of Corporations

Letter number: 307A00058069

COVER LETTER

TO:	Amendment Section				
	Division of Corporations				
CUDI	ECT: SOUTH EASTERN EXPRESS INC				
SUBJI	(Name of Corporation)				
DOCU	JMENT NUMBER: P06000109489				
	aclosed Statement of Change of Registered Office/Agent and fee are submitted for fi	ling.			
	return all correspondence concerning this matter to the following:				
	MAIDIEL ARIAS				
	(Name of Contact Person)				
SOUTH EASTERN EXPRESS INC (Firm/Company)					
	(a a sump y)				
	18350 NW 2ND AVE SUITE 401-A				
	(Address)	-			
MIAMI FL 33169 (City/State and Zip Code)					
	(City/State and Zip Code)				
For fu	rther information concerning this matter, please call:				
MAID	IEL ARIAS at (305) 4934363				
	IEL ARIAS at (305) 4934363 (Area Code & Daytime Tele	phone Number)			
Enclos	sed is a \$35.00 check made payable to the Department of State.				
Lilotos	and is a \$55,000 block indee payable to the Department of State.				
	Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive CenterTallahassee, FL 32301				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha		607.1508, or 617.1508, Florida Statutes, th ed under the laws of the State of FLORIDA ed agent, or both, in the State of Florida.		
1. The name of t	he corporation: SOUTH EASTERN EXPR	ESS INC		
2. The principal MIAMI FL 33	office address: 18350 NW 2ND AVE SUIT	E 401-A		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification:	Document number: P06000109489		
	street address of the current registered agament of State:	ent and registered office on file with the		
•	GUIDO-GUERRA -			
	18350 NW 2ND AVE SUITE 401	-A		
	MIAMI FL 33169		TAS	93
6. The name and (if changed):	(if changed) and /or registered office	CRETAR LAHAS	0CT 25	
	MAIDIEL ARIAS		Y OF	AK
18350 NW 2ND AVE SUITE 401-A			0] .1S	ö
	(P.O. Box NOT acceptable) MIAMI FL 33169		ADIA	t ₂
		ddress of the business office of its registere		•
Such change wa authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an officer so ified in writing of the change.	-	
x . (Signate	are quantities or director)	MAIDIEL ARIAS VP (Printed or typed name and title)		
I hereby accept I further agree of my duties, ar document is be	the annointment as registered agent and		formanc Or, if thi 1 that the	e is e
x I	<i>A</i>	10/10/2007		
	gnature of Registered Agent)	(Date)		
<u>.</u>	chalf of an entity:			
MAIDIEL ARI	Typed or Printed Name)	7		

APPROVEL AND FILED

**** FILING FEE: \$35.00 * * *