## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # **P94000004295**

SOUTHEAST PETROLEUM ENTERPRISES. INC.

SOUTHE	451 PETROLEUM EMTERFR									
Principal Place	of Business	Mailing Add	Iress							
4701 W SAMPLE RD 7597 LA CORNICHE CIRCLE						ļ				
COCONUT CREEK FL 33066 BOCA RATON FL 33433						İ	DO NOT WRITE IN THIS SPACE			
US					•		}	3. Date Incorporated or Qualifed		
								01/19/1994		
		T	A J.J						ed For	
2. Principal Place of Business 2a. Mailing Addre				Address				1 4. 1 2. 1 2. 1 2. 1	Applicable	
21		26						\$8.75 Ad		
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired Fee Requ	. ŧ	
22		27	Plata					6. Election Campaign Financing 55.00 M	av Be	
City & State	•	City & State						Trust Fund Contribution Added to		
23		Zip Country						This corporation owes the current year Intangible		
ΖΆρ	Country	<b>├</b>						Personal Property Tax.	]No	
24	25	29		30				10. Name and Address of New Registered Agent		
	9. Name and Address of Current	registered A	leur		81	Name	_			
, DUN	ERANCE, ROGER M P.A.									
1900 CORPORATE BLVD., N.W.					82	Street	Street Address (P.O. Box Number is Not Acceptable)			
	E 201A, EAST BLDG.				83					
	A RATON FL 33431	•			""					
BUC	A RATON PL 33431				84	City		EL 85 Zip Co	ode	
					Ш			time at his statement for the purpose of changing its re	egistered	
11. Pursuant	to the provisions of Sections 607.0503	2 and 607.1508	, Florida Statut	es, the a utborizer	bove I bv	-named the come	corpoi oration	oration submits this statement for the purpose of changing its run's board of directors. I hereby accept the appointment as regi	stered	
office or n	egistered agent, or both, in the State of m familiar with, and accept the obligat	tions of, Section	607.0505, Flo	rida Stat	utes	Jo., p		•		
	N.1	•								
SIGNATURE	Signature, typed or printed name of registered agen		·		Agen	t signature r	required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	PS IN 12	
12.	OFFICERS AN	D DIRECTORS		13.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	Addition	
TITLE	DPT		☐ DÉLETE	1.1 TI						
NAME	KLEOPA, ANDREA			1.2 N					1	
STREET ADDRESS	7597 LA CORNICHE CIRCLE			1.3 S	TREET	r address	ì			
CITY-ST-ZIP	BOCA RATON FL			1.4 C	TY-S	T-ZIP	<u> </u>	☐ Change	Addition	
TITLE	DVPS		☐ DELETE	. 2.1 Ti	TLE			□ Change		
NAME	KLEOPA, KLEOPAS			2.2 N	AME					
STREET ADDRESS	THE LA CORMICHE CIRCLE			2.3 S	TREE	T ADDRESS				
CITY-ST-ZIP	BOCA RATON FL			2.40	:пү-S	ST-ZIP				
TITLE			DELETE	3.1 TITLE				☐ Change	Addition	
NAME				3.2 N	AME					
				3.3 S	TREE	T ADDRESS	:	·	* * * * * * * * * * * * * * * * * * * *	
STREET ADDRESS				3.4. 0	CITY-S	ST-ZIP		<u> </u>		
CITY-ST-ZIP,			☐ DELETE	4.1 T				☐ Change	Addition	
				4.21	SMA					
NAME						T ADDRESS	;			
STREET ADDRESS	1					ST-ZIP		·		
CITY-ST-ZIP			DELETE	_	TTLE		1 -	☐ Change	Addition	
TITLE			_		IAME					
NAME						TADDRESS	s			
STREET ADDRESS	(BP)					ST-ZIP				
CITY-ST-ZIP	Part To		DELETE		TLE		+	☐ Change	☐ Addition	
TITLE				6.21	IAME					
NAME				1		T ADDRESS	s			
STREET ADDRESS						ST-ZIP				
!	1 -			■ 0.4 €	7 - ۲ ا ادر	31-21	1			

SIGNATURE:

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address; with all other like empowered.

**FILED** 

Jan 25, 1999 8:00am

**Secretary of State** 

01-25-1999 90068 044 \*\*\*150.00