

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 25 1997 8:00am  
Secretary of State

DOCUMENT # P94000048540 (6)

1. Corporation Name  
SOUTHEASTERN AGENCY, INC.



Principal Place of Business  
3785 N.W. SOUTH RIVER DRIVE  
MIAMI FL 33142

Mailing Address  
5000 S.W. 75TH AVENUE  
1ST FLOOR  
MIAMI FL 33155-4488

3. Date Incorporated or Qualified  
06/29/1994

3a. Date of Last Report  
03/26/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number  
65-0536564

Applied For  
Not Applicable

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

22. City & State

27. City & State

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

23. Zip

Country

28. Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

24.

25.

29.

30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PRENTICE HALL LEGAL & FINANCIAL SERVICES  
1 BISCAYNE TOWER  
2 SOUTH BISCAYNE BLVD, SUITE 1810  
MIAMI FL 33131

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent or officer of corporation (if not applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

D  
SIMAN, FERNANDO R  
5000 S.W. 75TH AVENUE, 1ST FLOOR  
MIAMI FL 33155  
D  
SIMAN, LUIS E  
5000 S.W. 75TH AVENUE, 1ST FLOOR  
MIAMI FL 33155  
D  
JUBIS, OSCAR  
5000 S.W. 75TH AVENUE, 1ST FLOOR  
MIAMI FL 33155  
D  
SIMAN, FERNANDO  
5000 S.W. 75TH AVENUE, 1ST FLOOR  
MIAMI FL 33155

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11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY-STATE-ZIP  
21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-STATE-ZIP  
31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-STATE-ZIP  
41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-STATE-ZIP  
51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-STATE-ZIP  
61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-STATE-ZIP

☐ Change ☐ Addition

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14. I do 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 included 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Filing #

CR2E034 (9/96)