## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 23, 2007 08:00 A Secretary of State **DOCUMENT # P94000056926** SOUTHEAST BUILDERS, INC. Mailing Address Principal Place of Business 6654 BRISTOL LAKE SOUTH 6654 BRISTOL LAKE SOUTH DELRAY BEACH, FL 33446 DELRAY BEACH, FL 33446 No Chg-P CR2E034 (11/05) 01102007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0510353 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KEMPNER, MICHAEL DO NOT WRITE 6654 BRISTOL LAKE SOUTH DELRAY BEACH, FL 33446 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DΡ TITLE KEMPNER, MICHAEL NAME STREET ADDRESS 6654 BRISTOL LAKE SOUTH U00000726706 05/04/07-80018-014 150.00 CITY-ST-ZIP DELRAY BEACH, FL 33446 TITLE KEMPNER, BARBARA NAME 6654 BRISTOL LAKE SOUTH STREET ADDRESS CITY-ST-ZIP DELRAY BEACH, FL 33446 TITLE NAME STREET ADDRESS DO NOT WRITE CiTY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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:

STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR