Apr-30-02 12:55P CHUCK SCHWEITZER CPA 9

FILED
May 15, 2002 8:00 am
Secretary of State
05-15-2002 90090 036 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000073469

1. Entity Name
SOUTHEAST MARKETING & SALES, INC.
c/o CHARLES E SCHWEITZER, CPA, PC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address: 1040 BAYVIEW DR. #320
City & State: FT. LAUDERDALE, FL
Zip: 333042532 County: BROWARD

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0537481 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent
Name: CHARLES E SCHWEITZER, CPA
Street Address (P.O. Box Number is Not Acceptable): 1040 BAYVIEW DRIVE #320
City: FT. LAUDERDALE, FL Zip Code: 33304

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.

SIGNATURE ______ DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so (See criteria on back) ☐

10. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
BEVERLY C. TRENT, PRES.	P O BOX 609, LEWISTON, NC 27849
JOHN O TRENT, SECRETARY	P O BOX 609, LEWISTON, NC 27849

DO NOT WRITE IN THIS SPACE

12. 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Beverly C. Trent BEVERLY C. Trent 4-30-02 PRES.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

CR2E034B (12/01)