

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000067973

Entity Name: SOUTHEAST MEDICAL, INC.

FILED
May 14, 2004
Secretary of State

Current Principal Place of Business:

1405 POINSETTA DR #10
DELRAY BEACH, FL 33474 US

New Principal Place of Business:

Current Mailing Address:

1405 POINSETTA DR #10
DELRAY BEACH, FL 33474 US

New Mailing Address:

FEI Number: 65-0604273

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LICA, STEVE
1405 POINTSETTA DR # 10
DELRAY BEACH, FL 33444 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRAY, REID
Address: 4 TUENER RD
City-St-Zip: MARBLEHEAD, MA

Title: VP () Delete
Name: LICA, STEVE
Address: 6238 NW 120 AVE
City-St-Zip: POMPANO BEACH, FL 33076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REID GRAY

PRES

05/14/2004

Electronic Signature of Signing Officer or Director

Date

The corporation has indicated in accordance with s. 607.193(2)(b), F.S., it did not receive the prior notice. They have requested the late fee be waived.