## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT # P95000077160**

SOUTHEAST METAL DECKS, INC.



**FILED** Feb 19, 2007 08:00 AM Secretary of State

CR2E034 (11/05)

Principal Place of Business

114 NE 1ST ST TRENTON, FL 32693 Mailing Address

P O BOX 308 TRENTON, FL 32693



## DO NOT WRITE IN THIS SPACE

01082007 No Chg-P  4. FEI Number		CR2E034 (11/05)		
			Applied For	
59-3346	3911		Not Applicable	
5. Certificate of	of Status Desired		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

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

SIGNATURE:

BURT, THEODORE M 114 NE 1ST ST TRENTON, FL 32693

## DO NOT WRITE IN THIS SPACE

01082007

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 proled name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finar Trust Fund Contribution.		ing	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LEMIEUX, ROGER 2549 NW 55TH AVE BELL, FL 32619						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000641613 03/01/07-80005-824 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Fiorida 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							