

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 17, 2003 8:00 am**  
**Secretary of State**

03-17-2003 90488 040 \*\*\*158.75

DOCUMENT # P96000022997

1. Entity Name

SOUTHEAST BUILDING SERVICES, INC.



Principal Place of Business

4769 NE 11TH AVE

OAKLAND PARK FL 33334

Mailing Address

4769 NE 11TH AVE

OAKLAND PARK FL 33334

2. Principal Place of Business

142 AVE L

Suite, Apt. #, etc.

PO BOX 339

City & State

MOORE HAVEN FL

Zip

33471

Country

3. Mailing Address

142 AVE L

Suite, Apt. #, etc.

PO BOX 339

City & State

MOORE HAVEN FL

Zip

33471

Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-0653645

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BURLESON, ERLIE

4769 NE 11 AVE

FT LAUDERDALE FL 33334

7. Name and Address of New Registered Agent

Name

BURLESON, ERLIE

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

142 AVE L, PO BOX 339

City

MOORE HAVEN

FL

Zip Code

33471

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)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PSC	<input type="checkbox"/> Delete
NAME	BURLESON, ERLIE	
STREET ADDRESS	221 E PROSPECT ROAD	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	BUELSON, GERALDINE A	
STREET ADDRESS	524 SW 10 AVE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	BURLESON, TOMMY	
STREET ADDRESS	524 SW 10 AVE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33312	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PSC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURLESON, ERLIE	
STREET ADDRESS	142 AVE L PO BOX 339	
CITY-ST-ZIP	MOORE HAVEN, FL 33471	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURLESON, GERALDINE A	
STREET ADDRESS	142 AVE L PO BOX 339	
CITY-ST-ZIP	MOORE HAVEN FL 33471	
TITLE	<del>BURLESON, TOMMY</del>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<del>BURLESON, TOMMY</del>	
STREET ADDRESS	<del>142 AVE L, PO BOX 339</del>	
CITY-ST-ZIP	<del>MOORE HAVEN FL 33471</del>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Geraldine A. Buelson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-03

863 946 1150

Date Daytime Phone #

CR2E034 (10/02)