

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 08:00 A
Secretary of State

DOCUMENT # P96000049260

1. Entity Name
SOUTHEAST GENERAL CONSTRUCTION, INC.



Principal Place of Business
**1045 E. ATLANTIC AVE
314
DELRAY BEACH, FL 33483 US**

Mailing Address
**1045 E. ATLANTIC AVE
314
DELRAY BEACH, FL 33483 US**



02062007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0671509	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

8. Name and Address of Current Registered Agent

**BOUERI, RABIH
1045 E. ATLANTIC AVE. SUITE 314
DELRAY BEACH, FL 33483**

**DO NOT WRITE
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)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BOUERI, RABIH
STREET ADDRESS	809 SEAGATE DR
CITY-ST-ZIP	DELRAY BEACH, FL 33483

TITLE	V
NAME	RIZK, RAYMOND
STREET ADDRESS	4700 LOTUS WAY
CITY-ST-ZIP	BOYNTON BEACH, FL 33436

TITLE	TS
NAME	BOUERY, TONY
STREET ADDRESS	647 LAKEWOOD CIRCLE, E.
CITY-ST-ZIP	DELRAY BEACH, FL 33455

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/20/07-80007-020 150.00

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/9/07