PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 OCT 16 PM 7:12

DOCUMENT # P97000031300

1. Corporation Name
Southeast United Management Company

D1

REINSTATEMENT

2. Principal Office Address	**3.** Mailing Office Address
11373 S.W. 211 St.	11373 S.W. 211 St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
10-11	10-11
City & State	City & State
Miami, Fl	Miami, Fl
Zip / Country	Zip / Country
33189 / U.S.A.	33189 / USA.

4. Date Incorporated or Qualified To Do Business in Florida 4/10/97

5. FEI Number 65-0742197 — Applied For / Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Joe F. Eutsey

Street Address (P.O. Box Number is Not Acceptable)
15448 S.W. 150 St.

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-10/26/01--01032--026
****758.75 ****758.75

Suite, Apt. #, Etc.

City: Miami — State: FL — Zip Code: 33196

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent _____ REGISTERED AGENT MUST SIGN — Date 12th Oct. 01

CR2E061 (9/00)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
President	Joe F. Eutsey	15448 S.W. 150 St.	Miami, Fl 33196
Vice President	Hopeton A. Wright	3705 Acapulco Dr.	Miramar, Fl 33023
Vice President	Karen M. Wright	15448 S.W. 150 St.	Miami, Fl 33196
			AD

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: _____ Joe F. Eutsey — 12th Oct. 01 — (305) 234-9440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #