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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9800001837 (7)

S.E. INVESTMENTS, INC.

Principal Place of Business

Mailing Address

## FILED May 12 1998 8:00am Secretary of State



C/O ROKNICH & GIBSON 1800 2ND STREET #901 C/O ROKNICH & GIBSON 1800 2ND STREET #901 SARASOTA FL 34236 SARASOTA FL 34236 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/30/1997 2. Principal Place of Businoss 21 3900 CLARU RD 2a. Mailing Address 4. FEI Number Applied For 39*0*0 CLARK RD Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired S76 Ste Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be SARASUSA Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 3 25 34233 Personal Property Tax due June 30. ☐ Yes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name ROKNICH, NICK III 1800 2ND STREET Street Address (P.O. Box Number is Not Acceptable) **SUITE 720** 63 SARASOTA FL 34236 STE # 901 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICE Change DELETE ☐ Addition TITLE 1.1 TITLE CHIEF EXECUTIVE SEDACCA, JEFFERY NAME 1.2 NAME 8223 MIDNIGHT PASS ROAD STREET ADDRESS 13 STREET ADDRESS SARASOTA FL 34242 CITY-ST-ZIP 1.4 City - ST - ZIP DELETE Officer | Change Addition TITLE 2.1 TITLE CHIEF FINANCIAL NAME HOWARD Q ESSENFELD 2.2 NAME HEAD RD STREET ADDRESS 2.3 STREET ADDRESS 277 INDIAN KINGS PARK NY CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. Thereby 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 annual report or suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address.