

**FILED**  
**Apr 29, 2002 8:00 am**  
**Secretary of State**

04-29-2002 90085 049 \*\*\*150.00

**FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

<b>DOCUMENT #</b> P98000022999	
<b>1. Entity Name</b> Southeast Development Group Inc.	
<b>DO NOT WRITE IN THIS SPACE</b>	

<b>2. Principal Place of Business</b> 1104 HIGHLAND BEACH DR Suite, Apt. #, etc. UNIT 1	<b>3. Mailing Address</b> PO BOX 1498 Suite, Apt. #, etc.
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<b>City &amp; State</b> HIGHLAND BEACH, FL	<b>City &amp; State</b> Boca Raton, FL
<b>Zip</b> 33487	<b>Zip</b> 33429
<b>Country</b> USA	<b>Country</b> USA

<b>4. FEI Number</b> 65-0879228	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

<b>DO NOT WRITE IN THIS SPACE</b>
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<b>7. Name and Address of Current Registered Agent</b>	
<b>Name</b> JEFF HARPSTER	
<b>Street Address (P.O. Box Number is Not Acceptable)</b> 1104 HIGHLAND BEACH DR	
<b>UNIT 1</b>	
<b>City</b> HIGHLAND BEACH FL	<b>Zip Code</b> 33487

<b>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.</b>	
<b>SIGNATURE</b> Jeff Harpster pres.	<b>DATE</b> 4/10/02

<b>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.</b> (See criteria on back) <input type="checkbox"/>	<b>January 1 - May 1 Fee is \$150.00</b> <b>After May 1, Fee is \$550.00</b> <b>Amended UBR is \$61.25</b> <b>Make Check Payable to Department of State</b>	<b>10. Election Campaign Financing Trust Fund Contribution.</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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<b>11. OFFICERS AND DIRECTORS</b>			
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	President / Sec / Treas. JEFF HARPSTER 1104 Highland Beach Dr Unit 1 Highland Beach, FL 33487	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	
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<b>13. 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 11 or on an attachment with an address, with all other like empowered.</b>	
<b>SIGNATURE:</b> Jeff Harpster pres.	<b>DATE</b> 3-12-02 <b>DAYTIME PHONE #</b> 561-445-7585

CR2E034B (12/01)