FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S49412

(7)

SOUTHEAST O.E.M., INC.

FILED Apr 08 1998 8:00am Secretary of State



	•	e of Busines	S		Mailing Addre	ess										
	001 WELLS I	ROAD			70 BLANDING											
SUITE A					ORANGE PARK FL 32073						DO NOT WRITE IN THIS SPACE					
ORANGE PARK FL 32073 US											3. Date Incorporated or Qualified					
											04/29/1991					
2.	Principal Pl	lace of Busi	ness		a. Mailing A	ddress				-	4. FEI Number		T	Ap	plied For	
21	21				26 2001 WELLS 10				`		19-3206491		Ī	No	t Applicable	
Suite, Apt. #, etc.					Suite, Apt. #, etc.						. = ,	ad 🗆	\$8	.75 /	Additional	
22				27	[27] A					ſ	5. Certificate of Status Desire	a 🗀	, i	ee Re	quired	
	City & State				City & State						6. Election Campaign Finance	ing	\$	5.00	May Be	
23				20	28 ORANGE PARK				<u>_</u>		Trust Fund Contribution				o Fees	
	Zip	Country			Zip Cou			Country			8. This corporation owes or	as paid the cu	rent y	ear Int	angible	
24			25	25	320	73	[30] L	USA			Personal Property Tax due		Yes] No	
		9. Name	and Address o	Current Reg	gistered Age	nt					10. Name and Address of N	w Registered	Agent			
İ	BEF	RNSTEIN, (CLARK					81	Name	,						
	70	BLANDING				82 Stree		Address	s (P.O. Box Number is Not Acc	entable)						
ORANGE PARK FL 32073								83	0.1001	7100,000	o (i .o. box trained is its riot riot					
								84	City			FL	85	Zip (Code	
11	Pursuant i	to the provis	sions of Sections pent, or both, in t	607.0502 and	f 607,1508, Fr	orida State	utes, the al	oove d by	e-named	d corpora	ation submits this statement fo 's board of directors. I hereby	r the purpose o	f chan	ging it	s registered registered	
		m familiar w	ith, and accept t	he obligations	of, Section 6	07 0505, F	Iorida Stat	utes	3.			, ,,			Ĭ	
SI	GNATURE	Signature types	d or printed name of reg	estored agent and	title if applicable	(NC	11. Registere	Age	ni signatur	re required w	when reinstating)	DATE				
12			OFFIC	ERS AND DIF			13.				ADDITIONS/CHANGES TO	OFFICERS ANI				
TIT	LE	D				DELETE	1.1 7	ſLE					Ц¢	hange	☐ Addition	
NA	ME		tein, Clark				1.2 N/	ME		}						
\$TI	REET ADDRESS		nding blvd.				1.3 \$1	REET	ADDRESS							
ĊII	Y-ST-ZIP	ORANG	E PARK FL				1.4 C	TY-S	T-ZIP							
TIT	LE					DELETE	2.1 7	ſLE					□ c	hange	☐ Addition	
NA	ME						2.2 N	ME								
ST	REET ADDRESS						2.3 \$7	REET	ADDRESS			•				
CITY-ST-ZIP									ST-ZIP							
TIT	LE					DELETE	3.1 1	ILE					C	nange	Addition Addition	
NA.	ME						3.2 N/	ME		1						
ST	REET ADDRESS						3.3 S1	REET	ADDRESS	1						
CH	Y-ST-ZIP						3.4. C	TY-5	ST-ZIP	L						
TIT	LE					DELETE	4.1 Ti	LE		1			□ c	hange	Addition	
NA	ME						4. 2 N	AME		1						
STI	EET ADDRESS						4.3 ST	REET	ADDRESS	1						
CIT	Y-ST-ZIP						4.4 CI	TY-S	T-ZIP	1						
TIT						DELETE	5.1 TI			1			□ c	hange	Addition	
NA	ME						5.2 N/	ME								
STI	EET ADDRESS						5.3 \$1	REET	ADDRESS	1						
	Y-ST-ZIP								T-ZIP	1						
TIT						DELETE	6.1 TI			† · · · ·			□ c	hange	Addition	
NA.							6.2 N			1			_	-	***	
	REET ADORESS								ADDRESS	1						
311	ELI MANTESS						0.3 8	HEEL	PEDDEGG	1						

64 CITY-51-ZIP

14. 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 annual report or supplemental 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 office or ordirector 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 attrachment with an address.

904-2726970