## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 02, 2007 08:00 AM Secretary of State

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1. Entity Name

SEARCH ENTERPRISES SOUTH, INC.



Principal Place of Business

12358 WILES ROAD SUITE #407

SIGNATURE:

CORAL SPRINGS, FL 33076

Mailing Address

12358 WILES ROAD SUITE #407

CORAL SPRINGS, FL 33076



## DO NOT WRITE IN THIS SPACE

 
 02262007
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number 65-0308192
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NAPLES-LAWDOCK, INC. 1395 PANTHER LANE, SUITE 300 NAPLES, FL 34109-7874

## 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  Signalure Insect or printed ingree of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaturg)  DATE									
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE									
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	<ol><li>Election Campaign Finance Trust Fund Contribution.</li></ol>	\$5.00 May Be						
10.	OFFICERS AND DIREC	TORS							
TITLE NAME STREET ADDRESS CHY-ST-ZIP	PSD POLACEK, FRANK J. 12358 WILES ROAD CORAL SPRINGS, FL 33076		1 · · · · · · · · · · · · · · · · · · ·	V00000653100					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BUCZ, DONNA L. 1506 ELIZABETH CT. KIRKLAND, IL 60146			03/13/07-80007-010 150.00					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN 7	THIS SPACE					
TITLE NAME STREET ADDRESS CHY-S1-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-7IP									
12. Thereby cortify 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.									