

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

INCORPORATION
ARTICLE OF INCORPORATION

1995



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA 32399-0001

DOCUMENT # V36312

(9)

SOUTHEAST PRINTING CORPORATION

APPROVED
AND
FILED

RECEIVED

FILED

9300 S. DADELAND BLVD. #209
MIAMI FL 33156

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MIAMI FL 33156

2. Filing Date		2a. Mailed Date		3. Filing Date (if not 2/28/95)		3a. Date of Last Report	
21. Filing Agent		26. Filing Agent #		4. Filing Agent		Applied For	
22. Filing Agent		27. Filing Agent #		5. Certificate of Status Entered		\$8.75 Additional Fee Required	
23. Filing Agent		28. Filing Agent #		6. Election Campaign Expenses		\$5.00 May Be Added to Fees	
24. Filing Agent		29. Filing Agent #		7. Filing Agent		8. Filing Agent	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
STERN, RONALD K. 9300 S. DADELAND BLVD. #209 MIAMI FL 33156				81. Filing Agent			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83. Filing Agent			
				84. City			
				FL 85. Zip Code			
11. Pursuant to the provisions of Sections 603, 604, and 605, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office and 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 605, Florida Statutes.							

SUBMITTED

Signature of Filing Agent (Required for all filings except for annual reports)

Signature of Registered Agent (Required for all filings except for annual reports)

FILE

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	D STERN, RONALD K.	NAME	
STREET ADDRESS	9300 S. DADELAND BLVD.	STREET ADDRESS	
CITY	MIAMI FL	CITY	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information included on this official report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if it were signed by the registered agent or director of the corporation or the registered agent or director of the corporation. I am familiar with and accept the obligations of Section 605, Florida Statutes.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95

FILE CASE SIGN
& DATE