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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation	MENT # 42188 Name EE & SONS, INC.	36 (3)		1 1881K 81818 1180 1488 1880 188	
Principal Place of Business Mailing Address 6810 41ST AVENUE, E 6810 41ST AVENUE, E					IO BIIN BIRKA BUDIN BIBIN BIIDIK DUDIN BIBIN YOBU
				3. Date Incorporated or Qualified 03/23/1973	3a. Date of Last Report 03/24/1995
2. Principal Pla	ce of Business	2a. Mailing Address 26		4. FEI Number 59-1445683	Applied For Not Applicable
Suite, Apt. #	, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Oity & State		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip 24	Country 25	Ζφ 29	Country 30	8. This corporation has liability for Florida Statutes	intangible tax under s 199.032, s □ No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New I	Registered Agent
KAVANAUGH, E.C. JR. 543 10TH ST., WEST BRADENTON FL 33505			83	82 Street Address (P.O. Box Number is Not Acceptable)	
			84 City		FL 85 Zip Code
SIGNATURE		ND DIRECTORS	OTE: Registered Agent signature requirements.	··	DATE FICERS AND DIRECTORS IN 12
THEE NAME STREET ADDRESS CITY-S1-21P	FD LEE, MELVIN S. 6810 41ST AVE E BRADENTON FL	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		Change Addition
TITLE NAME STREET ADDRESS	D LEE, MALCOLM C 923 VIEW DR FIICHMOND CA	☐ DELETE	2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	S Lee, Judy M 6810 41 St ave e	☐ DELETE	3. 1 TITLE 3.2 NAME 3.3 STREET ADDRESS		Change Addition
CITY-S1-ZIP TITLE NAME STREET ADDRESS	EIRADENTON FL 1 LEE, JOSEPHINE 923 VIEW DRIVE FIICHMOND CA	☐ DELETE	3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	HIGHNOUD OA	☐ DELETE	4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 6.4 CM - CL - ZIP		Change Addition
CITY-ST-ZIP TITLE NAME STHEET ADDRESS CITY-ST-ZIP		☐ DELETE	5.4 City-St-ZiP 6.1 Title 6.2 Name 6.3 Stheet address 6.4 City-St-ZiP	for the exemption stated in Section 119	Change Addition

14. I do nereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 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.

SIGNATURE:

OFFICER OF ORRECTOR S. LET, Prisident 4/21/96

CR2E034 (12/95)