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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 656226

(8)

## **FILED** Feb 13 1997 8:00am Secretary of State

LEE HII	NG, INC.									
Principal Pla	ice of Business	Mailing Address				I (BBILD DIED BILL BILL BILL BILL BILL BILL BILL BIL	ı Alıkılı Alakı Gikti bini	. EISII 810		
5131 14TH ST BRADENTON		5131 14TH ST W Bradenton FL 34207-2	431							
						3. Date Incorporated or Qualified 02/19/1980	3a. Date of L 02/27/19		ort	
2. Principal	Principal Place of Business 2a. Mailing Address					4. FEI Number		Appl	ied For	
21	1 26					59-2106680	Not Applicable			
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1 +	<b>75</b> Ad		
22		27					· F	e Requ		
City & Sta	ate	City & State				6. Election Campaign Financing Trust Fund Contribution		.00 M		
Žip	Country	Zip	Co	untry		8. This corporation has liability for		der s. 1	99.032,	
24	25	29]	30				Z Yes ☐ No			
	9. Name and Address of Curre	ent Registered Agent		04		10. Name and Address of New Re	gistered Agent			
	ALOCK, ROBERT			81	Name	•				
802 11TH STREET WEST				82	Street A	ddress (P.O. Box Number is Not Acceptal	ss (P.O. Box Number is Not Acceptable)			
BH	ADENTON FL 33505			83						
				84	C3		les l	Zıp Co		
				1	City		FL 85			
office or agent. I SIGNATURE						corporation submits this statement for the pration's board of directors. I hereby acce	DATE	m as re	Gistered	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	CERS AND DIREC	CTORS	IN 12	
TITLE	VD	☐ DELETE	1.1 1	I.1 TITLE			☐ Ch	ange	Addition	
NAME	LEE, THOMAS KIN WAI	1.2		1.2 NAME						
STREET ADDRESS			1.3 \$	STREET	ADDRESS					
CITY - ST - ZIP	BRADENTON FL			1.4 CITY-ST-ZIP						
TITLE	SD	DELETE		2.1 TITLE			☐ Ch	ange	Addition	
NAME	LEE, RICKY KIN KWAN		2.2 1	MAME	ĺ					
STREET ADDRESS			2.3 5	STREET	ADDRESS					
CITY - ST - ZIP	BRADENTON FL	Doriere			ST-ZIP			2000	Addition	
TITLE		<b>∐</b> DELETE	3.1				L.j Ch	ange	L. ∧ouinoii	
NAME				VAME						
STREET ADDRESS	S				ADDRESS					
CITY-ST-ZIP TITLE		DELETE		CHY-:	ST-ZIP		☐ Ch	ange	Addition	
NAME				NAME						
STREET ADDRESS	c		1		ADORESS					
CITY-ST-ZIP	3				ST-ZIP					
TITLE		DELETE		TITLE	Ell		☐ Ch	ange	Addition	
NAME		•		NAME						
STREET ADDRESS	s		5.3	STREET	ADDRESS					
CITY-ST-ZIP			5.4 (	CHTY-S	ST-ZIP					
TITLE		DELETE		TITLE			☐ Cr	ange	Addition	
NAME			6.21	NAME						
STREET ADDRESS	s		6.3	STREET	I ADDRESS					
CITY · ST - ZIP			6.4	CITY-S	ST - ZIP					

14. I do 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 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.