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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secre ary of State **DIVISION OF CORPORATIONS**

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90190 047 ***150.00

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DAVID B. LEE, JR., & ASSOCIATES, CHARTERED

Principal f*lace of Business Mailing Address			1 10 Ectil Malt : 2000 121/0 Birlin Hana carl Birli		***********				
767 BLAND NG	BLVD	767 BLANDING BLVD							
107	El 22005	107 ODANGE DARK EL 3206"	20400			DO NOT WRITE IN T-	IIS SPACE		
ORANGE PARK FL 32065 ORANGE PARK FL 32067-0400 US US				3. Date Incorporated or Qualifed			7		
•		••				01/12/1984			İ
2. Principal Pl	. Principal Place of Business 2a. Mailing Address			4. FEI Number	A	plied For	7		
21	26				59-2348332	N	t Applicable	7	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5, Certifcate of Status Desired	\$8.75	Additional],
22		27		_		5. Certificate of Status Desired	Fee R	equired	_
City & State	3	City & State				6. Elect on Campaign Financing	\$5.00	May Be	1
23		28				Trust Fund Contribution	Added	o Fees	4
Zìp	Country	Zip		untry		8. This corporation owes the current year			
24	25	29	30			Personal Property Tax.	□Yes	No	4
	9. Name and Ac dress of Curre	nt Registered Agent		Od Name		10. Name and Address of New Registe e	d Agent		-
100	DAVID B., JR.			81 Name	3				
	BLANDING BLVD,			82 Stree	t /\ddre	ess (P.O. Box Number is Not Acceptable)	·		7
107	DEANDING BEVD,			00					4
	NGE PARK FL 32065			83					
Oite	AGE I AIN I'E 32000			84 City			85 Zip	Code	7
				<u>ļ 1.—</u>		-			4
11. Pursuant t	to the provisions of Sections 607.050 egistered agent, or both, in the State	of Florida, Such change was	utes, the a authorize	above-name d by the cor	a corpo poratio	oration submits this statement for the purpose n's board of directors. I hereby accept the app	or changing its sointment as re	gistered	
agent. I ar	m familiar with, and accept the oblig-	ations of, Section 607.0505, F	lorida Sta	tutes.	-				
SIGNATURE		W 1296 W 185011 W 187	art. Business			when reinstatir q) DAT :			1_
12.	Signature, typed or printed name of registered ag	VD DIRECTORS	13.	a Agent signature	r iquired	when reinstatir g) DAT : ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO)RS IN 12	(11/98)
TITLE	PST	DELETE	1.1 T	ITLE		7.551 151161611VIII 000 1 0 01 1 1 1 1 1 1 1 1 1 1 1 1 1	Change	Addition	₁ <u>;</u>
NAME	LEE, DAVID B., JR.		1.2 N	AME					
STREET ADERESS	767 BLANDING BLVD, 107		4	TREET ADDRESS	s				8
CITY-ST-ZIF	ORANGE PARK FL			ITY-ST-ZIP					CR2E034
TITLE	OTPHIOL I MINITE	DELETE	2.1 T				☐ Change	Addition	√ ১
NAME			2.2 N	AME					-
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CITY-ST-ZIF			- 1	CITY-ST-ZIP					1
TITLE		☐ DELETE	3.1 T				Change	Addition	<u>آ</u>
NAME			3.2 N	IAME					
STREET ADI RESS			3.3 S	TREET ADDRESS	S.				
CITY-ST-ZIF			3.4. 0	CITY-ST-ZIP	1				1
TITLE		☐ DELETE	4.1↑				☐ Change	Addition	ı]
NAME			4.21	NAME					
STREET ADDIRESS			438	TREET ADDRESS	ŝ				1
CITY-ST-ZIF			4.4 C	ITY-ST-ZIP					
TITLE		☐ DELETE	5.1 T				Change	Addition	-[
NAME			5.2 N	IAME					
STREET ADDRESS			5.3 S	TREET ADDRESS	3				_
C(TY-ST-ZI-)			5.4 0	ITY-ST-ZIP					<u>:</u> ≡
TITLE		☐ DELETE	6.1 T	TLE			Change		
NAME			6.2 N	AME					
STREET AD IRESS		\supset	6.3 S	TREET ADDRES	3				
CITY-ST-ZI?		1	6.4 C	ITY-ST-ZIP	1				

14. The eby certify that the information supplied indicated on this annual report or supplimentation or the corp ration or the corp ration. s Ming does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information tal report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an an interest to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in intwith an address, with all other like empowered. officer or director of the o Block 12 or Block 13 if on

SIGNATURE:

CITY-ST-ZI?

ATURE AND TYPED OR PRINTED NAME OF SEAING OFFICER OR DIRECTOR