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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 28 1997 8:00am Secretary of State

1997 DOCUMENT # H 94714

CORAL-LEE PROPERTIES INC.

Principal Place of Business

Mailing Address

4426 5.E. 16 PL

P.O. BOX 246 GAPE CORAL

0	APE CORI	46 FL 33	904	PL	339	10	,		rated or Qualified 16 -1986		ate of La	ist Report
2.	Principal Place of Bus	smess	2a . Mai	ling Address				4. FEI Number		*		Applied For
21			26					5	9-2632	549		Not Applicable
22	Surfe Apt #, etc 22			Suite, Apt. #, etc.				5. Certificate of Status Desired See Required Fee Required				
23	City & State		City 28	& State				6. Election Cam Trust Fund Co				.00 May Be ded to Fees
24	Zip	Country 25	Zıp 29		30	intry		8. This corporati Florida Statute	on has liability for es	intangible Yes [er s. 199.032,
Ĺ	9. Nam	ne and Address of Cu	rrent Registered	Agent		Ĺ.,		10. Name and A	ddress of New Re	gistered	Agent	
	CLAUNE	TANSO	w			81	Name					
						82	Street Addre	Street Address (P.O. Box Number is Not Acceptable)				
Sur # 2					83							
1011E TO AL FL 33904						84	City	85 Zip Code				

11. Pursuant to the provesions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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, and accept the obligation of Section 607.0505. Florida Statutes.

SIGNATURE CLAVOE JANSON PRESIDENT 4-18-97										
SIGNATURE	ripled contracting overest agent and title it applicable (NOT	FE: Registered Agent signature r	required when reinstating)	DATE						
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO O	FICERS AND DIRECTOR	S IN 12					
BRE	V O □ DELETE	1 1 TITLE		Change	Addition					
NAME	JOHN JANSON	1.2 NAME								
STREET ANDRESS	4434 5.8. 14 PL SUITE#2	1.3 STREET ADDRESS								
Off 9 - 51 - 732	CAPE CORAL FL 33904	1.4 CITY-ST-ZIP								
TITLE		2.1 f(TLE		Change	☐ Addition					
NAME	CLAUDE JANSON	22 NAME								
STEFFE LACTURESS	CLAUDE JANSON HY76 S.E. 16 PL SOITE#2 CAPE CORAL PL 33904	2 3 STREET ADDRESS								
381 Y - 81 - 70	CAPE CORAL FL 33904	2 4 CITY-ST-ZIP								
107.1	L. DELETE	3.1 TITLE 7		Change	Addition					
19754		32 NAME		(X_{α})	~~XIX					
$(SABHELAb) \approx 955$		3.3 STREET ADDRESS			//\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\					
Citros 72		3 4. CITY - ST - ZIP		<u> </u>	1 Y					
TULE	DELETE	4 1 TITLE		☐ Change	Addition .					
NAME		4. 2 NAME								
\$18601.4608655		4.3 STREET ADDRESS								
01 * 54 7 *		4.4 CITY - ST - ZIP								
The	DELETE	5.1 TITLE		Change	Addition					
NAM:		5.2 NAME								
$S0e(CR,Se), \phi_{C}$		53 STREET ADDRESS								
CIEV ST AF		5 4 CITY-ST-ZIP								
hhi	DELETE	6.1 FITLE	3000021 -04/30/9701	COP-Spange	Addition					
DM.		62 NAME	-04/30/9701	ñ22n 19	1					
SHIFTMERS		6.3 STREET ADDRESS	***165.00	W100 W 2 W						
City Styles		64 CITY - ST - ZIP								
14 1 on hance	as certify that the information supplied with this filing does not quali-	fy for the exemption sta	ated in Section 119 07(3\(i)) Florida Sta	tutes. I further certify that t	he					

The control of the co

SIGNATURE