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

PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90174 021 ***150.00

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L27604

1. Corporation Name

SIGNATURE:

LEE'S DISCOUNT GOLD INC.

27 5. Certificate of Status Desired City & State 6. Election Campaign Financing	SPACE	App ied For Not Applicable
TAMARA FL 33321-2733 DO NOT WRITE IN THIS SP. 3. Date Incorporated or Qualifed 11/06/1989 2. Principal Place of Business 2a. Mailing Address 2b. Suite, Apt. #, etc. 2c. Suite, Apt. #, etc. 2d. City & State City & State DO NOT WRITE IN THIS SP. 3. Date Incorporated or Qualifed 11/06/1989 4. FEI Number 65-0155357 5. Certificate of Status Desired	\$8.75	Not Applicable
DO NOT WRITE IN TH S SP. 3. Date Incorporated or Qualifed 11/06/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0155357 Suite, A₁t. #, etc. 5. Certificate of Status Desired City & State City & State 6. Election Campaign Financing	\$8.75	Not Applicable
3. Date Incorporated or Qualifed 11/06/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0155357 Suite, Apt. #, etc. 5. Certificate of Status Desired City & State	\$8.75	Not Applicable
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22 27 City & State City & State 6. Election Campaign Financing	Fee R	5 Additional
		Required
		00 May Be
23 Trust Fund Contribution		ed to Fees
Zip Country Zip Country 8. This corporation owes the current year Intang		[7.4-
24 25 29 30 10000000000000000000000000000000000	Yes	[]No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Age 81 Name	igent	
LEE, SEI JA		
8321 BLACK OLIVE DRIVE 82 Street Address (P.O. Box Number is Not Acceptable)		
TAMARAC FL 33319 83		
17/10/10/10 12 000/10		
84 City FL ⁸	85 Zip	
11. Pursuant to the provisions of Sc ctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of characteristics.		ip Code
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of cirectors. I hereby accept the approintm	changing it	its registered
agent. I am familiar with, and a cept the obligations of, Section 607.0505, Florida Statutes.	changing it otment as r	its registered
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6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

ME OF SIGNING OFFICER OR DIRECTOR