**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS FILED

00 JAN -4 AM 9: 07

SECRETARY OF STATE FACCAHASSEE. FUORIDA

OCUMENT Corporation Name	#	L99546
Cornoration Name		

CANTON LEE, INC.

	Princ	ipal	Pla	ice	of	Bus	sines	;
î	3862	SW	56	ST				

FL 33175

Mailing Address 13862 SW 56 ST MIAMI FL 33175

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			09/11/1990	·
. Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For
1	26		65-0218858	Not Applicable
Suite, Apt. #, etc.	Suite: Apt. #, etc		5. Certificate of Status Desired	-\$8.75 Additional
City & State	City & State		_6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be - Added to Fees
Zip Country	Zip Cc 29 30	ountry	8. This corporation owes the current year Intangible Personal Property.	Yes No
9. Name and Address of C	urrent Registered Agent		10. Name and Address of New Registered A	gent
LEE, GING LAM		81 Name		
7510 SW 31 ST.		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
MIAMI FL 33155		83		
		84 City	FL	85 Zip Code
11. Pursuant to the provisions of sections 607	7,0502 and 607,1508, Florida Statutes, the a	bove-named corpor	ation submits this statement for the purpose of cha	nging its registered

office or agent. I	am familiar with, and accept t	he obligations of, section 607.0505, Florid	norized by the la Statutes	corpe	poration's board of directors. Intereby accept the appointment as registered
GNATURE	Signature, typed or printed name of regi	istered agegy oAd title if applicable. (NOTE:	Registered Agent	Signetti	
	OFFIC	ERS AND DIRECTORS	13.	J	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN
LE	P	DELETE	1.1 TITLE		Change Ad-
	LEE CINC LAM	<del></del>	1.2 NAME		the state of the s

12.	_	OFFICERS AND DIRECTORS	13.	$\smile$	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	LEE, GING LAM		1.2 NAME		4000031050046
STREET ADDRESS	7510 SW 31 ST.		1.3 STREET ADOR	RESS	4000031050046 s -01/20/0001103013
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZiP		****150.00 ****150.00
TITLE	VP	DELETE	2.1-TITLE		Change Addition
NAME	LEE, NGAR S		2 2 NAME	1	
STREET ADDRESS	7510 SW 31 ST		2.3 STREET ADD	RESS	4000031050046 -01/20/0001103014
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		
TITLE	=	DELETE	3.1 TITLE		*****750.00 *****750.00
NAME			3.2 NAM€		
STREET ADDRESS		•	3.3 STREET ADDR	RESS	s
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME	{		4.2 NAME	ĺ	
STREET ADDRESS			4.3 STREET ADDR	RESS	s
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	1	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADD	RESS	s
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	. [	Change - Addition
NAME	-		6.2 NAME		6.00
STREET ADDRESS			6.3 STREET ADDR	RESS	KE

6.4 CITY-ST-ZIP 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.

SIGNATURE:

305-383-8978