FILED 2002 UNIFORM BUSINESS REPORT (UBR) Jul 16, 2002 8:00 am Secretary of State DOCUMENT # P00000069144 1. Entity Name LEE E. DEBELL, INC. 07-16-2002 90374 042 \*\*\*550 00 Principal Place of Business , Mailing Address 2082 S.W. AGUERO ST. 2082 S.W. AGUERO ST. PT ST. LUCIE FL 34953-1703 PT ST. LUCIE FL 34953-1703 970458 incipal Place of Business ERGREEN TERR Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State 4. FEi Number Applied For 65-1028574 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DEBELL: LEE E Street Address (P.O. Box Number is Not Acceptable) 2082 S.W. AGUERO ST. PT ST. LUCIE FL 34953-1703 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After September 13, 2002 Fee will be \$750.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME DEBELL, LEE NAME STREET ADDRESS 2082 SW AQUEDO ST STREET ADDRESS CITY-ST-7IP PORT SAINT LUCIE FL 34953 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 report or supplemental 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 received particular trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Affachment

970458

## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 3, 2002

LEE E. DEBELL, INC. 486 SE EVERGREEN TERR PT ST. LUCIE, FL 34983-3259

SUBJECT: LEE E-DEBELL, INC. Ref. Number: P00000069144

We have received your document for LEE E. DEBELL, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

We are unable to waive or reduce the late fee. The corporation received the corporate annual report/uniform business report and notice that failure to file the report by May 1 would result in a \$400.00 late fee.

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers Document Specialist

Letter Number: 402A00042102