2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000029641

1. Entity Name WINSTON R. LEES, INC.

FILED Apr 26, 2006 08:00 AM **Secretary of State**

Principal Place of Business

3451 NW 3 ST FT LAUDERDALE, FL 33311 Mailing Address

3451 NW 3 ST

FT LAUDERDALE, FL 33311



DO NOT WRITE IN THIS SPACE

No Chg-P 04132008

CR2E034 (11/05)

4. FEI Number 20-0176881

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEES, WINSTON R 3451 NW 3 ST FT LAUDERDALE, FL 33311

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the putions of registered agent.	rpose of changing its registered of	office or re	egistered agent, or bo	th, in the State of Fforida. I am familian	with, and accep	
SIGNATURE Signature, typed or printed name of registered again and title t		applicable. (NOTE: Registered Agent signature required when reinstaling)			DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financin Trust Fund Contribution.	9 U	\$5.00 May Be Added to Fees	U00000535109 05/08/06-80039-014	150.80	
10.	OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEES, WINSTON R 3451 NW 3 ST FT LAUDERDALE, FL 33311					-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						·	
TITLE MAME STREET ADDRESS CITY-ST-ZP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 cath, 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 eppears in Block 10 or Block 11 is changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: WINSTON

TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CRY-ST-ZIP

Lees

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR