## 2007 FOR PROFIT CORPORATION

SIGNATURE:

## Jun 12, 2007 8:00 am Secretary of State ANNUAL REPORT (AR) DOCUMENT # P06000015815 04-13-2007 90169 019 \*\*\*150.00 1. Entity Namo SUE MARIE LEE, INC. Principal Place of Business Mailing Address **PP018310** 6324 60TH CIR EAST APT 902 78324 601H CIR EAST APT 902 SARASOTA FL 34243 SARASOTA FL 34243 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suito, Apt. 4, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 20-0403013 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LEE, SUE MARIE 8324060TH CIR EAST Stroot Address (P.O. Box Number is Not Acceptable) APT 902 SARASOTA FL 34243 8234 1 Zio 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. (NOTE Registered Acert signature required when re-next DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 MILE Delete tistE ☐ Cleange LEE, SUE MARIE MAM -SINETI ADDRESS 632060TH CIR EAST - APT 902 STREET ADDRESS SARASOTA FL 34243 CITY-ST-202 CITY-51-70 ☐ Delete uni ımı. - Change Addition HALE SINFL! ADDRESS STREET ADDRESS CITY-SI-7P CHTY - S.I.- 7IP ☐ Delete ME ☐ Chapge Addition NAME MANE STREET ADDRESS STRILL ADDRESS CITY-SI-ZIP CISY-ST-ZIP nne ☐ Delete HILF Change Addition MALE STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY-SI-71P TATLE Delete HILL ☐ Change Addition NAME NAME STRUT ADDRESS SIRVET ADORESS CITY-SI-78 CITY - ST- ZIP HALE ☐ Change Addition Defete MAKE MANE SIRLET ADDRESS SIREET ADDRESS CITY-SI-7P CITY SI-70P 12. I hereby costily that the information supplied with this filing does not qualify for the examptions contained in Section 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 logal effect as if made under eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

4-4-07

941 - 358-1324

ATTACHMENT 66018910 #POG 00015815

8234 60th Circle E Apt 902 Sarasota, FI 34243 June 6, 2007

Florida Dept of State Division of Corporations P O Box 6327 Tallahassee, FI 32314

To Whom It May Concern;

In reference to your letter dated April 19, 2007 the reason for not returning your request for the FEI number is that I have had a heart attack prior to April 5th and was hospitalized until May 3rd when I returned home. Because I was in a weakly and sickened condition I was not aware of this letter and just opened my mail today, June 6th I apologize for the delay. I realize that I have allready paid the fee of \$150.00 and I hope this clears up the matter. If you need any proof regarding this letter please let me know and I will be happy to furnish any documentation needed.

Sincerely, Sue Marie Lee, Inc FEI # 20-0403013