

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morhart
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000008243 (7)

1. Corporation Name
PANDA LEE, INC.



Principal Place of Business
1215 CAPE CORAL PKWY.
CAPE CORAL FL 33904

Mailing Address
1215 CAPE CORAL PKWY.
CAPE CORAL FL 33904

3. Date Incorporated or Qualified 11/30/1992
3a. Date of Last Report 02/14/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
65-0377748

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

City & State

City & State

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

23

28

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEE, TSAU-DAU
PANDA LEE, INC.
1215 CAPE CORAL PARKWAY
CAPE CORAL FL 33904

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent

Signature typed or printed name of registered agent

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

☒ DELETE

1.1 TITLE

☐ Change ☒ Addition

NAME

LEE, TSAU-DAU

2480 CYPRESS POND RD., #1116

PALM HARBOR FL 34683

1.2 NAME

JOING C Lee

1215 Cape Coral Pkwy

CAPE CORAL, FL 33904

STREET ADDRESS

CITY-STATE-ZIP

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

TITLE

D

☒ DELETE

2.1 TITLE

☐ Change ☒ Addition

NAME

LEE, KE-TI

2480 CYPRESS POND RD., #1116

PALM HARBOR FL 34683

2.2 NAME

I - CHI LIU

1215 Cape Coral Pkwy

CAPE CORAL, FL 33904

STREET ADDRESS

CITY-STATE-ZIP

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

TITLE

☐ DELETE

3.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-STATE-ZIP

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

TITLE

☐ DELETE

4.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-STATE-ZIP

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

TITLE

☐ DELETE

5.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-STATE-ZIP

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

TITLE

☐ DELETE

6.1 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-STATE-ZIP

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: X

CHI LIU

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-786

711-542-8666

CR2E034 (12/95)