

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000076564

Entity Name: NICLEE, INC.

FILED
Apr 18, 2005
Secretary of State

Current Principal Place of Business:

1334 S. KILLIAN DRIVE
SUITE #3
LAKE PARK, FL 33403 US

Current Mailing Address:

1334 S. KILLIAN DRIVE
SUITE #3
LAKE PARK, FL 33403 US

FEI Number: 65-0446818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOLYNEUX, CARA
1334 S. KILLIAN DRIVE
SUITE #3
LAKE PARK, FL 33403 US

New Principal Place of Business:

4168 WESTROADS DRIVE
SUITE D
WEST PALM BEACH, FL 33407 US

New Mailing Address:

4168 WESTROADS DRIVE
SUITE D
WEST PALM BEACH, FL 33407 US

Name and Address of New Registered Agent:

MOLYNEUX, CARA
4168 WESTROADS DRIVE
SUITE D
WEST PALM BEACH, FL 33407 US

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.

SIGNATURE:

04/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOLYNEUX, MICHIEL
Address: 1334 S. KILLIAN DRIVE, SUITE #3
City-St-Zip: LAKE PARK, FL 33403

Title: D () Delete
Name: MOLYNEUX, MICHIEL
Address: 1334 S. KILLIAN DRIVE, SUITE #3
City-St-Zip: LAKE PARK, FL 33403

Title: D (X) Delete
Name: MOLYNEUX, MICHIEL
Address: 1334 S. KILLIAN DRIVE, SUITE #3
City-St-Zip: LAKE PARK, FL 33403

Title: D (X) Delete
Name: MOLYNEUX, CARA
Address: 1334 S. KILLIAN DRIVE, SUITE #3
City-St-Zip: LAKE PARK, FL 33403

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MOLYNEUX, MICHIEL
Address: 4168 WESTROAD DRIVE, SUITE D
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D (X) Change () Addition
Name: MOLYNEUX, CARA
Address: 4168 WESTROADS DRIVE, SUITE D
City-St-Zip: WEST PALM BEACH, FL 33407

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARA MOLYNEUX

D

04/18/2005

Electronic Signature of Signing Officer or Director

Date