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APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



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

95 APR 19 PM 4:49

DOCUMENT # P94000081532 (1)

1. Corporation Name

LEE BRU CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

4521 17TH ST APT 6
SAN FRANCISCO CA 94114

Mailing Address

4521 17TH ST APT 6
SAN FRANCISCO CA 94114

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/07/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 285 NW 199 STREET

26 285 NW 199 STREET

4. FEI Number

65-0534184

Applied For

Not Applicable

Suite, Apt., etc.

Suite, Apt., etc.

22 204

27 204

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

23 MIAMI, FL

28 MIAMI, FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 33169

25 USA

29 33169

30 U.S.A.

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

B & C CORPORATE SERVICES INC
201 S BUSCAVINE BLVD
MIAMI CENTER SUITE 3000
MIAMI FL 33131

81 Name

GELBER APPEL & CO

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

285 NW 199 STREET - #204

83

84 City

MIAMI

FL

85 Zip Code

33169

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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when renouncing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME KEIZLER, LEE
STREET ADDRESS 160 W DIVERSEY PARKWAY APT 3
CITY - ST - ZIP CHICAGO IL 60614

TITLE D
NAME KEIZLER, BRUCE
STREET ADDRESS 4521 17TH ST APT 6
CITY - ST - ZIP SAN FRANCISCO CA 94114

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - 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 110.07(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:

BRUCE KEIZLER

4-11-95

(Date)

(Signature)