

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Jul 10 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 1. Corporation Name  
P950000017716  
Lee's Drilling Services Inc.

Principal Place of Business Mailing Address  
5912 SW 25th Hollywood FL 33023

2. Principal Place of Business 2a. Mailing Address

21. Suite, Apt #, etc 26. Suite, Apt #, etc

22. City & State 27. City & State

23. Zip 25. Country 28. Zip 29. Country 30. Country

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified  
Mar. 3 1995

4. FEI Number  
65-0563866

5. Certificate of Status Desired  Applied For  Not Applicable  \$8.75 Additional Fee Required

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

Andra N Lee  
5912 SW 25th  
Hollywood FL 33023

10. Name and Address of New Registered Agent

81 Name Andra N Lee  
82 Street Address (P.O. Box Number is Not Acceptable) 5912 SW 25th  
83 City Hollywood FL 33023  
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 607.0505, Florida Statutes.

SIGNATURE: Andra N Lee DATE: 5/16/98

12. OFFICERS AND DIRECTORS

TITLE	PSO	<input type="checkbox"/> DELETE
NAME	Lee, Andra N	
STREET ADDRESS	3246 Hayes ST	
CITY-ST-ZIP	Hollywood FL 33021	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	500002585605
43 STREET ADDRESS	-07/10/98--01082--037
44 CITY-ST-ZIP	***150.00
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	25
53 STREET ADDRESS	7.10
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Andra N Lee Andra N Lee DATE: 4/26/98 954-989-8704

CR2E034 (10/97)