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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000038760 (1)

D. BRUCE LEE CONTRACTING, INC.

698 LONE OAK DRIVE

698 LONE OAK DRIVE

PORT ORANGE FL 32127

LEE, BRUCE D

PORT ORANGE FL 32127

STREET ADDRESS

STREET ADDRESS

STREET ADORESS

CITY-ST-ZIP

CITY - ST - ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

| 698 LONE OAK DRIVE PORT ORANGE FL 32127 | | 698 LONE OAK DRIVE PORT ORANGE FL 32127 | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/12/1995 | | | |
|---|--|--|----------------|---|---|--|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 4. FEI Number | Applied For | | |
| 21 | | 26 | | 59-3312431 | Not Applicable | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5, Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| City & State | | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | | |
| Zip 24 | Country 25 | 7ip | Country 30 | | This corporation owes or has paid the cu Personal Property Tax due June 30. | irrent year Intangible Yes No | |
| g. Name and Address of Current Registered Agent | | | | | 10. Name and Address of New Registered Agent | | |
| LEE, D. BRUCE 898 LONE OAK DRIVE PORT ORANGE FL 32127 | | | 81 82 83 | Street Address (P.O. Box Number is Not Acceptable) | | | |
| 11, Pursuant office or r agent. I a SIGNATURE | to the provisions of Sections 607, rogistered agent, or both, in the Sam familiar with, and accept the of Signature, typed or printed name of registers. | bligations of, Section 607.0505, Flo | orida Statute | re-named by the corp es. | corporation submits this statement for the purpose of poration's board of directors. I hereby accept the appropriate required when reinstaling) DATE | of changing its registered pointment as registered | |
| 12. OFFICERS AND DIRECTORS 13. | | | 13. | | ADDITIONS/CHANGES TO OFFICERS AN | | |
| TITLE | | | 1.1 TITLE | | | ☐ Change ☐ Addition | |
| NAME | 1 | | 1.2 NAME | | | | |
| Stiffed implicate the same and | | | 1.3 STREE | T ADDRESS | | | |
| CITY-ST-ZIP | | | 1.4 CITY- | ST-ZIP | | | |
| TITLE | | | 21 THILE | | | Change Addition | |
| NAME | Lee, Bruce D | | 2 2 NAME | | · | | |

3.1 TITLE

3.2 NAME

4.1 TITLE 4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

DELETE

23 STREET ADDRESS

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADORESS

4.4 CITY - ST - ZIP

3.4. CITY-S1-ZIP

2 4 CITY-ST-ZIP

6.4 CITY-ST-ZIP 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 appear with an address.

41/25/00

9011-711-4771

Change

Change

Change

Change

Addition

Addition

Addition

Addition

FILED

May 04 1998 8:00am

Secretary of State