

FILED
Jul 25, 2001 8:00 am
Secretary of State

03-15-2001 90030 001 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000041438

1. Entity Name

Lee Hi Developers, Inc.

Principal Place of Business

8321 Black Olive Dr.
Tamarac, FL 33321

Mailing Address

8321 Black Olive Dr.
Tamarac, FL 33321

2. Principal Place of Business

Same as above

3. Mailing Address

Same as above

State, Apt. #, etc.

State, Apt. #, etc.

City & State

City & State

Zip

County

USA

Zip

County

USA

4. FEI Number

0716924126

Applied For

(Not Applicable)

5. Certificate of Status Desired

\$8.75 Additional Fee Requested

6. Name and Address of Current Registered Agent

Lee Chang Gil
8321 Black Olive Dr.
Tamarac, FL 33321

7. Name and Address of New Registered Agent

Lee Chang Gil
8321 Black Olive Dr.
Tamarac, FL 33321

8. The above named entity submits this statement for the purpose of changing its registered office or registered name, or both, in the State of Florida.

SIGNATURE

Chang Gil Lee

9. This corporation is eligible to satisfy its franchise

tax filing requirements and elects to do so.

(See instructions on back)

FILE NOW! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$350.00

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution

\$5.00 may be

Added to Fee

11.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption listed in Section 190.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 partner or owner empowered to execute this report as required by Chapter 607, Florida Statutes and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an affidavit, with all other true information.

SIGNATURE:

Chang Gil Lee

954 661-6248

Attachment
Doc# P96000041438
76804



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

July 11, 2001

LEE/HI DEVELOPERS, INC.
8321 BLACK OLIVE DR
TAMARAC, FL 33321

Subject: LEE/HI DEVELOPERS, INC.

Reference P96000041438
Number:

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The Federal Employer Identification Number listed in Block 4 appears to be invalid. An FEI number is comprised of nine digits and it is not the same as your Social Security number. Please amend your document accordingly. For more information about the FEI number, please call the Internal Revenue Service at 1-800-829-1040.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE
CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX
1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE
DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/SA
ANNUAL REPORTS SECTION

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314