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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jun 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000071457 (1)

LEE INVESTORS, INC.

Principal Place of Business 3306 SE 22ND AVENUE CAPE CORAL FL 33904		Mailing Address 3306 SE 22ND AVENUE CAPE CORAL FL 33904-4421			
				3. Date Incorporated or Qualified 3: 08/26/1996	a. Date of Last Report
2. Principal P	lace of Business	28. Mailing Address	errysperion (f. 1. mae'n 1 Yapennese Amerikaan (f. 15. 66) (f. 1. 66) (f. 1. 66)	4. FELNumber 65 - 070 803	2 Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	And the state of t	5. Certificate of Status Desired	CR 75 Additional
City & State	e	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Z _I p	Country	B. This corporation has liability for intan	gible tax under s. 199.032,
24 4	25 9. Name and Address of Curre	nt Registered Agent	[30]	Florida Statutes Ye 10. Name and Address of New Registe	
OFF.		in registered Agent	81 Name	IV. Isamo and Address of Ison hegiste	sion Agent
¢ 4729	Mann, ernest a esq. D DEL Prado BLVD.			ddress (P.O. Box Number is Not Acceptable)	
CAP	E CORAL FL 33904		83		
			84 City		FL 85 Zip Code
₹ office or r	registered agent, or both, in the State or familiar with, and accept the oblig Signature, typed or printed name of registered ag	e of Florida. Such change was pations of, Section 607.0505, F	authorized by the corpo	corporation submits this statement for the purporation's board of directors. I hereby accept the equired when refristating)	appointment as registered
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TILLE		☐ Change ☐ Addition
NAME	SCHAUDE, KLAUS		1.2 NAME		
STREET ADDRESS	1204 FLAMINGO DRIVE		13 STREET ADDRESS		
CITY-ST-ZIP	CAPE CORAL FL 33904		1.4 CHY-ST-ZIP		
TITLE	D	☐ DELETE	2 1 HILE		Change Addition
NAME	SCHNEIDER-CHRISTIANS, MIC	CHAEL	2 ? NAME		
STREET ADDRESS	3306 SE 22ND AVENUE		23 STREET ADDRESS		
CITY-ST-ZIP TITLE	CAPE CORAL FL 33904	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		. Change Addition
NAME		L DECENE	3.1 TILLE 3.2 NAME		Change Addition
STREET ADDRESS					
			3 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CHY-ST-7/P 4.1 HILE		Change Addition
NAME			4. 2 NAME		Ed onsige Ed vicenses
STREET ADDRESS					
CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 City-St-Zip		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
CYDEET ADDDESS			C 2 CTREET ADDRESS		

14. I do hereby certify that the information supplied with this filling 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 eath; 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.