

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000055025

FILED  
Jan 18, 2004  
Secretary of State

**Entity Name:** CUSTOM BUILT SCREEN ENCLOSURES OF LEE CO., INC.

**Current Principal Place of Business:**

745 NE 19TH PL  
SUITE E  
NORTH FORT MYERS, FL 33903 US

**New Principal Place of Business:**

**Current Mailing Address:**

5351 COLONY CT  
CAPE CORAL, FL 33904 US

**New Mailing Address:**

**FEI Number:** 65-0766925

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HEMED, DAVID  
1930 SE 21ST TERRACE  
CAPE CORAL, FL 33990 US

**Name and Address of New Registered Agent:**

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

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: HEMED, DAVID  
Address: 1930 SE 21ST TERRACE  
City-St-Zip: CAPE CORAL, FL 33990

Title: VT ( ) Delete  
Name: HEMED, JACOB  
Address: 2107 SW 52ND STREET  
City-St-Zip: CAPE CORAL, FL 33914

Title: S ( ) Delete  
Name: DOMBROWSKI, ALIZA  
Address: 5351 COLONY CT.  
City-St-Zip: CAPE CORAL, FL 33904

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** PRESIDENT/DAVID HEMED

MR.

01/18/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date