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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P97000075697 (7)

LEE'S ELECTRITECH INC.

FILED Mar 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					ı radiradı fire inini indir serin ottik enini nevili fabbi tilin dirik itrili 1641 (164)	
POST OFFICE BOX 2387 KEY LARGO FL 33037		POST OFFICE BOX 2387 KEY LARGO FL 33037				
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 08/29/1997	
2. Principal F	Place of Business	2s. Mailing Address			4. FEI Number Applied For	
21		26			65-078-0898 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired See Regulred \$8.75 Additional Fee Regulred	
City & Stal	18	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution	
Zip	Country	Zip	Country		8. This corporation owes or has paid the current year intangible	
24	25	29	0		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Agent	
V	VILSON, LEE E		8	1 Name		
101600 OVERDEAC MODIMAY #17				82 Street Address (P.O. Box Number is Not Acceptable)		
KEY LARGO FL 33037			8	Street	Address (P.O. Box Number is Not Acceptable)	
, n	ET DANGO FE 33037		8	3		
			[<u> </u>		
	•		8	4 City	85 Zip Code	
44 15	4-16-16-16-16-16-16-16-16-16-16-16-16-16-	0	45.5.1		FL 60 24 0000	
office or	to the provisions of Sections 607.050 registered agent, or both, in the State	iz and 607. 1508, Florida Statutes, Jof Florida. Such change was aut	, the abo horized b	ve-named ov the con	d corporation submits this statement for the purpose of changing its registered reporation'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						
	Signature typed or printed name of registered age	``		gent signature	e required when reinstaling) DATE	
12.	, 	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	☐ DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTIONS IN 12 PT	
NAME	WILSON, LEE E		1.2 NAME		WILSON, Lee b.	
STREET ADDRESS	POST OFFICE BOX 2387	MAILING- ADD.	1.3 STREI	ET ADDRESS	101600 OVERSEAS HWY #17	
CITY-ST-ZIP	KEY LARGO FL 33037		1.#CITY-	ST-ZIP	Key LARGO, FL 33037	
TITLE	VP\$	☐ DELETE	2.1 TITLE		VPS Change Caraddition	
NAME	WILSON, CAROL A		2.2 NAME		(WILSON, CAROL A	
STREET ADDRESS	POST OFFICE BOX 2387	0.1	2.3 STREE	T ADDRESS	1/21600 Greascas Awy #17	
CITY-ST-ZIP	KEY LARGO FL 33037	MAILING ADD.	2. 4 CITY	-ST-ZIP	Key LARGO, 72, 33037	
TITLE	42.	DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY			
TITLE		DELETE	4.1 THILE		Change Addition	
NAME			4. 2 NAMI			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY- 5.1 TITLE	OI - CH-	☐ Change ☐ Addition	
		- Dittil			Andricon	
NAME ATREET ADDRESS			5.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY -	ST-ZIP	Thomas I say	
TITLE		☐ DELET E	6.1 TITLE	ĺ	Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		
CITY-ST-ZIP			6.4 CITY-			
14. I hereby o	certify that the information supplied w	ith this filing does not qualify for t	he exem	otion state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(4), Florida statutes. I number certify mat the informatic 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if glianged, or on an attachment with an address.