

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 09, 2004 8:00 am
Secretary of State

06-09-2004 90001 047 ***150.00

DOCUMENT # P98000017181

1. Entity Name
LEE'S LIL' ANGEL TRUCKING, INC.



Principal Place of Business
**4728 SW 170TH ST
ARCHER, FL 32618**

Mailing Address
**P.O. BOX 1028
ARCHER, FL 32618-1028**

44046304



03122003 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3520301

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**LEE, DAVID E
4728 S.W. 170TH ST.
ARCHER, FL 32618**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

David E Lee President

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

6-3-04

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LEE, DAVID E
STREET ADDRESS	PO BOX 1028
CITY-ST-ZIP	ARCHER, FL 326181028
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David E Lee

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-3-04

Date

Daytime Phone #

352-495-2828

Attachment

P9860001718/

To Whom Concerned: 44046304

Both of these checks
to pay corporation dues
were mailed to the
wrong address. They
were returned to me
about the 20th of May.
Please waive late charges
as they were initially
overnighted to arrive by
the 1st of May.

Thank you,

Carol E. Lee