

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000131556

**Entity Name:** ROBERTO LEE, PA

**Current Principal Place of Business:**

6240 SAINT ANDREWS CIR N  
FORT MYERS, FL 33919

**Current Mailing Address:**

6240 SAINT ANDREWS CIR N  
FORT MYERS, FL 33919 US

**FEI Number:** 20-3531022

**Certificate of Status Desired:** No

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

LEE, ROBERTO  
6240 SAINT ANDREWS CIR N  
FORT MYERS, FL 33919 US

*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

**Officer/Director Detail :**

Title PV  
Name LEE, ROBERTO  
Address 6240 SAINT ANDREWS CIR N  
City-State-Zip: FORT MYERS FL 33919

Title ST  
Name LEE, ROBERTO  
Address 6240 SAINT ANDREWS CIR N  
City-State-Zip: FORT MYERS FL 33919

*I hereby 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 all other like empowered.*

**SIGNATURE:** ROBERTO LEE

PV

01/26/2023

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date