

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000083047

**Entity Name:** LEE CARE CORPORATION

**Current Principal Place of Business:**

2210 E 2ND AVE  
TAMPA, FL 33605

**Current Mailing Address:**

900 S MEADOWS PKWY  
APT 2424  
RENO, NV 89521

**FEI Number:** 81-4150593

**Certificate of Status Desired:** No

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

LEE, HENRY  
2210 E 2ND AVE  
TAMPA, FL 33605 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:**

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Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                |
|-----------------|----------------|
| Title           | MGR            |
| Name            | LEE, HENRY     |
| Address         | 2210 E 2ND AVE |
| City-State-Zip: | TAMPA FL 33605 |

*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:** HENRY LEE

MGR

04/06/2017

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Electronic Signature of Signing Officer/Director Detail

Date