2002 UNIFORM BUSINESS REPORT (UBR)

Jan 18, 2002 8:00 am Secretary of State DOCUMENT # 375794 1. Entity Name 01-18-2002 90011 018 ***150.00 KEY REALTY & DEVELOPMENT, INC. Principal Place of Business Mailing Address P.O. BOX 220-139 826 POLK ST HOLLYWOOD FL 33022 HOLLYWOOD FL 33019 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1362270 Not Applicable 2ip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DEMORA, JULIAN SR. Street Address (P.O. Box Number is Not Acceptable) 826 POLK ST HOLLYWOOD FL 33019 City Zip Code 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Delete TITLE Change TITLE DEMORAJULIAN J. NAME STREET ADDRESS 826 POLK ST. STREET ADDRESS HOLLYWOOD FL 33019 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE NAME DEMORA JR, JULIAN NAME STREET ADDRESS 2845 ENTERPRISE #107A STREET ADDRESS CITY-ST-ZIP DEBARY FL 32713 CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE NAME NAME FELDMAN, PAM STREET ADDRESS STREET ADDRESS 837 NLK SYBELIA DR CITY-ST-ZIP CITY-ST-ZIP MAITLAND FL 32751 TITLE STDV ☐ Delete TITLE Change ☐ Addition HOUSEOWORTH, DONNA NAME NAME STREET ADDRESS STREET ADDRESS 2845 ENTERPRISE RD #107A CITY-ST-ZIP CITY-ST-ZIP DEBARY FL 32713 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. Thereby 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 11 or Block 12 if

changed, or on an attach

SIGNATURE:

FILED