

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006914

FILED
Feb 20, 2006
Secretary of State

Entity Name: KEYTRADE AG CORP.

Current Principal Place of Business:

ZURCHERSTRASSE 68
8800 THALWIL/SWITZERLAND, XX

New Principal Place of Business:

ZURCHERSTRASSE 68
THALWIL/SWITZERLAND, ZH 8800 XX

Current Mailing Address:

ZURCHERSTRASSE 68
8800 THALWIL/SWITZERLAND, XX

New Mailing Address:

3030 N.W. ROCKY POINT DR. WEST
SUITE 555
TAMPA, FL 33607 XX

FEI Number: 98-0367793

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCORPORATING SERVICES, LTD.
1540 GLENWAY DRIVE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: KEYMAN, MELIH
Address: IN DER BETHALDEN 5
City-St-Zip: 8803 RUSCHLIKON/ SWITZERLAND, XX

Title: VC () Delete
Name: GOETZ, HANNES
Address: SEESTRASSE 5
City-St-Zip: 8803 RUSCHLIKON/SWITZERLAND, XX

Title: DVP () Delete
Name: VATERLAUS, ANDREAS
Address: SEESTRASSE 18
City-St-Zip: 8803 RUSCHLIKON/SWITZERLAND, XX

Title: D () Delete
Name: ARNOLD, PETER B
Address: GOTTHARDSTRASSE 3
City-St-Zip: 6300 ZUG/SWITZERLAND, XX

Title: ST () Delete
Name: MEIER, WERNER A
Address: RANKESTRASSE 25
City-St-Zip: 8700 KUSNACHT/SWITZERLAND, XX

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JUAN MANUEL GONZALEZ

VP

02/20/2006

Electronic Signature of Signing Officer or Director

_____ Date