


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2007 8:00 am
Secretary of State

03-22-2007 90005 035 ***150.00

DOCUMENT # 267518		
1. Entity Name KEY TRAVEL SERVICES, INC.		

Principal Place of Business 241 SEVILLA AVE. CORAL GABLES, FL 33134 US	Mailing Address P. O. BOX 149222 CORAL GABLES, FL 33114-9222 US
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40055020



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03202007 Chg-P CR2E034 (12/06)

4. FEI Number 59-0997458	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P EL-NAFFY, HANI 241 SEVILLA AVENUE CORAL GABLES, FL 33134 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCFO INSERRA, JOHN F 241 SEVILLA AVENUE CORAL GABLES, FL 33134 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP/CFO Inserra, John F. 241 Sevilla Avenue Coral Gables, FL 33134 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V TENAZAS, MARISSA (LOUIE R 241 SEVILLA AVENUE CORAL GABLES, FL 33134 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V/AS Tenazas, Marissa R. 241 Sevilla Avenue, Coral Gables, FL33134 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/V JORDAN, BRUCE A 241 SEVILLA AVENUE CORAL GABLES, FL 33134 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/V/General Counsel Jordan, Bruce A. 241 Sevilla Avenue Coral Gables, FL 33134 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/T THOMPSON, PETER M 241 SEVILLA AVENUE CORAL GABLES, FL 33134 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/T/AS Thompson, Peter M. 241 Sevilla Avenue Coral Gables, FL 33134 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MANCILLA, SERGIO 241 SEVILLA AVENUE CORAL GABLES, FL 33134 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **Bruce A. Jordan - Secretary 3/20/07 305/520-8400 or 8056**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40039640

KEY TRAVEL SERVICES, INC.

ATTACHMENT
TO
2007 FOR PROFIT CORPORATION ANNUAL REPORT
FLORIDA
DOCUMENT #267518

LIST OF ADDITIONAL OFFICERS

Legal Name (Last – First – Middle Initial)	Title(s)	Address	Change/Addition
Lazopoulos, Emanuel	Senior Vice President	241 Sevilla Avenue Coral Gables, FL 33134	Addition
Rice, Paul J.	Senior Vice President	241 Sevilla Avenue Coral Gables, FL 33134	Addition
Contreras, Richard	Vice President and Assistant Treasurer	241 Sevilla Avenue Coral Gables, FL 33134	Addition
Vicente, Monica	Vice President and Assistant Treasurer	241 Sevilla Avenue Coral Gables, FL 33134	Addition