FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 453471

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KEY WEST MARINE HARDWARE, INC.

FILED
May 01 1997 8:00am
Secretary of State

- ғипсіраі мас	rincipal Place of Business Mailing Address					•••••••			
B18 CAROLINE STREET KEY WEST FL 33040		818 CAROLINE STREET KEY WEST FL 33040-8658							
						3. Date Incorporated or Qualified 05/23/1974		ite of Last F 27/1996	Report
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number		A	pplied For
21		26				59-1541714		N	lot Applicable
Suite, Apt		Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & Sta	te	City & State				6. Election Campaign Financing			May Be
23 Zip	Country	Zip	Cou	15550		Trust Fund Contribution			to Fees
24	25	29	30	ını.y		This corporation has liability in Florida Statutes	YK Yes [] No	s. 199.032,
	9, Name and Address of Curre	ant Registered Agent		81	None	10. Name and Address of New	Registered /	Agent	
	RRIDO, HUMBERTO J			61	Name				
	CAROLINE STREET WEST, FL			82	Street Ac	ddress (P.O. Box Number is Not Accep	table)		
330			:	83					
				84	City		FL	85 Zip	Code
44 Purcusat	to the provisions of Sections 607 Of	502 and 607 1509 Florida St	latutae the s	DO:	named c	orporation submits this statement for the		Changing	ite registered
SIGNATURE	Signature type on printed name of registored a	igent and title if applicable.	(NOTE: Registere			ration's board of directors. I hereby account of the state of the country of the	DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AND		
TILLE	VS ANDRO ANNOTOTO	☐ DELETE]			Change	Addition
NAW:	GARRIDO, HUMBERTO 818 CAROLINE STREET		1.2 N/						
STREET ADDRESS	KEY WEST, FL 33040				AODRESS				
CHTY-ST-ZIF	PT PT	DELETE	1.4 Cl		1-ZiP			Change	Addition
NAMÍ	GARRIDO, HUMBERTO J.	bud passare	2.2 N						, 100 mg
STREET ADDRESS	818 CAROLINE STREET	•			ADDRESS	•			
CITY-ST ZIP	KEY WEST, FL 33040		2.40	::TY - 5	ST-ZIP				
TITLE		☐ DELETE						Change	Addition
NAME			3.2 N	AME					
STREET ADDRESS			335	TAEET	ADDRESS				
CITY ST 2011					ST-ZIP	· · · · · · · · · · · · · · · · · · ·			
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NAME			4.2 N		1				
STREET ADDRESS					ADDRESS				
CHTY+S1+ZiP		DELETE			T-ZIP			☐ Change	Addition
III.E		ביין טננגונ	5.1 Ti 5.2 N					- Criange	L., regultion
NAME STREET ADDRESS					ADDRESS .				
C-TY - S1 - Zip					T-ZIP	•			
TITLE		DELETE			II - LIF			Change	Addition
NAME			6.2 N						•
STREET ADDRESS					ADDRESS				
CHTY-ST-ZIP			6.4 C						
QCL1 - Q 1 - Cl7	I was all a fall and a fall a	Tank to the state of the state				ted in Cooling 110 07/2Vi) Florida Ctat	den lifuthor		t the

. I do hereby 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if changed, or on an attainment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED THE OF SIGNANG OFFICER OR DIRECTOR

4-24-91

305-29 4-35/9 Daylara Prone /