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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

1. Corporation Name

503002

(8)

KHY	WEST	ALC)E	INC.

Principal Place o	of Business	Maling Address		a inmini mitia maina sitet dutit d'a	DISM CIMI MINITE BENEF MINITE NEWER NIMITE NEWER OF
524 FRONT STREET P O BOX 1079 KEY WEST FL 33041-1079 US		524 FRONT STRE P O BOX 1079 KEY WEST FL 33			
		ÜS	Off 1970	 Date Incorporated or Qualified 05/12/1976 	3a. Date of Last Report 04/27/1995
——————————————————————————————————————		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #,	ata	26		59-1712189	Not Applicabl
22	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution	Added to Fees
4	25	29	30	8. This corporation has liability for in Florida Statutes X Yes	ntangible tax under s. 199.032,
	9. Name and Address of Curri			10. Name and Address of New R	
W W W W W W W W W W W W W W W W W W W			81 Name		- Biologo Magnit
ROMAN	io,frank n.		82 Street A	Pelana /D.O. Pan Ni maka ia Nasa a	
524 FRONT ST.			62 Street Av	ddress (P.O. Box Number is Not Acceptable	(e)
KEY WEST FL 33040			83		
	•		94 66		
	•		84 City	poration submits this statement for the purp	FI 85 Zip Code
or registered		Gueri eur lugus, rienga Statut	æs.		
SIGNATURE	, and accept the obligations of, Se gnature, typod or profed name of registered ago	vot and little ("applicable." ((NO"E Registered Agent signature req	ured when reinstating)	DATE
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SIGNATURE: LLL A Cates HELEN M. CATES
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-294-5592 Daytime Prone #