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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthani Secretary of State DIVISION OF CORPORATIONS

DOCUMENT	#	507	8

(3)

1. Corporation	Name	- ,	~,			
KEYES	FLORIDA, INC.					
112120	TEOMBA, IIIO.				A MANAY BANKA BANKA DA MARAN KANA BAN	NA NIDE BERNI BERNI BERNI BERNI BERNI BERNI HARE
Principal Place	of Business	Mailing Address				IN TINE NIGUE BINNE ALBN AINN ASAIC DINN FANC
ONE SE THIS	RD AVE	ONE SE THIR	D AVE			
11TH FLOOR		11TH FLOOR				
MIAMI FL 331 US	131	MIAMI FL 331: US	31		3. Date Incorporated or Qualified	3a. Date of Last Report
00		00			07/26/1976	05/01/1995
2. Principal Pla	ce of Business	2a. Maling Addre			4. FEI Number	Applied Far
21		26			59-1696152	Not Applicable
Suite, Apt. #	, etc	Suite, Apt. #,	etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to rees
Ζφ 24	Country 25	Zip	Cou	ntry	8. This corporation has liability for Florida Statutes	intangible tax under s. 199.032,
24]	9. Name and Address of Curren	29 A Registered Agent	30		10. Name and Address of New F	
				81 Name	IV. Italia and Address of Item I	iogratered Agent
EDIENI A	NDER, BRUCE D					
	THIRD AVE			82 Street Add	ress (P.O. Box Number is Not Acceptab	ole)
SUITE 1				83		
MIAMI F						
	2 33.31			84 City		FL 85 Zip Code
11. Pursuant to	the provisions of Sections 607.050?	and 607.1508, Florida	Statutes, the abo	ve-named corpo	ration submits this statement for the pur	pose of changing its registered office
or registere familiar witr	d agent, or both, in the State of Flore n, and accept the obligations of. Secti	.la. Such change was a ion 602 0505. Florida 5	authorized by the d Statutes	orporation's bea	ird of directors. Thereby accept the app	óintment as régistered agent. Lan
SIGNATURE	.,					
	g large, typed or printed har lend registered agon	and the flaggerable	(NOTE: Ray steren	Agend Sign affire regions	d who the stating	DATE
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFF	
TILE	D	DELE	TE 1 1 TI	fLF .		Change C Addition
NAME	SHAW, RAY M		. 12 NA	ME		
STREET ADDRESS	ONE SE THIRD AVE 11TH F	LOOR	13 S ¹	REFT ADDRESS		
City-St-ZiP	MIAMI, FL 00000	5 3.000		IY-S1-ZIP		
TITLE	VTD	DELE				☐ Change ☐ Addition
NAME	PAPPAS, TIMOTHY D	1 00D	2 2 NA	ľ		
STREET ADDRESS	ONE SE THIRD AVE 11TH F	LOUR		REET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI, FL 00000 D	XX DELE		TY - ST - ZIP		Chagos C Addition
NAME	•	AA DELE				Change Addition
STREET ADDRESS	SMITH, FRED STANTON ONE SE THIRD AVE 11TH F	1 AAB	3 2 NA			
ŀ	MIAMI FL	LOUN		IRFET ADDRESS		
CITY-S1-ZIP TITLE	D D		CONTRACTOR OF THE REAL PROPERTY AND ADDRESS OF	IY SI-ZIP T-F		Change Addition
NAME	PAPPAS, T.J		4 2 NA	1	80000179	982 <u>29. </u>
STREET ADDRESS	ONE SE THIRD AVE 11TH F	LOOR		FEET ADDRESS	-04/29/96010	J41~-U4U
CITY-SI-ZIP	MIAMI FL	LOOM		[Y - \$1 - 71P	***200.00	
TITLE	D	DELE				Change Addition
NAME	SHAW, RAY M		52 NA	ŀ		
STREET ADDRESS	ONE THIRD AVE 11TH FLOO	OR .		HEET ADDRESS		
CITY - ST - ZIP	MIAMI, FL 00000	-	ı	IY ST-ZIP		
TITLE	DP	☐ DELE				Change Addition
NAME	PAPPAS, MIKE I.		62.04	ME		ا ب _ا با
STREET ADDRESS	ONE SE THIRD AVE 11TH F	LOOR	6351	REET ADDRESS		/ 屮.レヒ
CITY-ST-ZIP	MIAMI FL		6 4 CF	TY - ST - ZIP		ι

14. I do hereby certify that the information supplied with this fring is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this aneuth report or supplemental annual 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 13 if changed, or or an attachment with an address

SIGNATURE:

TIMOTHY D. PAPPAS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

4/25/95 (305) 371-3592