

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

FILED

Apr 29 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **523334** (1)

1. Corporation Name  
**KEY WARREN, INC.**

Principal Place of Business

% HOLDING CAPITAL GROUP INC.  
104 CRANDON BLVD #419  
KEY BISCAYNE FL 33149  
US

Mailing Address

% HOLDING CAPITAL GROUP INC.  
104 CRANDON BLVD. #419  
KEY BISCAYNE FL 33149  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**01/27/1977**

4. FEI Number

**59-1722530**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional**

**Fee Required**

6. Election Campaign Financing

Trust Fund Contribution ☐

**\$5.00 May Be**

**Added to Fees**

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**SPENCER, S.A.  
251 CRANDON BLVD.  
#164  
KEY BISCAYNE FL 33149**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>PD</b>	<input type="checkbox"/> DELETE
NAME	<b>SPENCER, S. A.</b>	
STREET ADDRESS	<b>251 CRANDON BLVD. #164</b>	
CITY - ST - ZIP	<b>KEY BISCAYNE FL</b>	

TITLE	<b>VD</b>	<input type="checkbox"/> DELETE
NAME	<b>SPENCER, MARY M.</b>	
STREET ADDRESS	<b>251 CRANDON BLVD. #164</b>	
CITY - ST - ZIP	<b>KEY BISCAYNE FL</b>	

TITLE	<b>400</b>	<input type="checkbox"/> DELETE
NAME	<b>DONAGHY, JAMES W.</b>	
STREET ADDRESS	<b>104 CRANDON BLVD #419</b>	
CITY - ST - ZIP	<b>KEY BISCAYNE FL</b>	

TITLE	<b>25</b>	<input type="checkbox"/> DELETE
NAME	<b>LEISCHNER, STEVEN</b>	
STREET ADDRESS	<b>1979 DOGWOOD DR</b>	
CITY - ST - ZIP	<b>WESTFIELD NJ</b>	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	

3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	<b>Donaghy, James W</b>
3.3 STREET ADDRESS	<b>7 Ridgewood Drive</b>
3.4 CITY - ST - ZIP	<b>Bridgewater, CT</b>

4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I 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 oath; that I am an officer or director of the corporation or the receiver or trustee or authorized 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 attachment with an address.

SIGNATURE: *James W. Donaghy* - James W. Donaghy - 4/23/98 - (305) 361-8864

CR2E034 (10/97)