

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morahan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 595261 (9)

1. Corporation Name

KEY ASSOCIATES, INC.



Principal Place of Business

38 SOUTH CRANDON BLVD.
KEY BISCAINE FL 33149

Mailing Address

38 SOUTH CRANDON BLVD.
KEY BISCAINE FL 33149

3. Date Incorporated or Qualified
11/15/1978

3a. Date of Last Report
06/20/1995

2. Principal Place of Business

21

Suite, Apt., #, etc.

22

City & State

23

Zip

Country

24

9. Name and Address of Current Registered Agent

PREVITI, PETER
1514 SAN IGNACIO AVE.
SUITE 200
CORAL GABLES FL 33146

2a. Mailing Address

26

Suite, Apt., #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-1861502

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

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 or officer, if applicable.

Agent: Peter Previti Agent's phone number (state and area code)

DATE

12. OFFICERS AND DIRECTORS

TITLE

SD

☐ DELETE

NAME

MARZOUCA, FOUD
38 S CRANDON BLVD
MIAMI, FL 00000

STREET ADDRESS

CITY - ST - ZIP

TITLE

PD

☐ DELETE

NAME

SHALHUB, GEORGE E
38 S CRANDON BLVD
MIAMI, FL 00000

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

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TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), 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 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 attachment with an address.

SIGNATURE:

George E Shalhub

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George E Shalhub

4/18/96

Printed Name

CR2E034 (12/95)