

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H65580

FILED
Jul 08, 2004
Secretary of State

Entity Name: HISPANIC KEYS BROADCASTING CORPORATION

Current Principal Place of Business:

16502 NW 52 AVE
MIAMI, FL 33014 US

New Principal Place of Business:

5513 NW 52 AVENUE
GAINESVILLE, FL 322653 US

Current Mailing Address:

5200 NW 43ST
STE 102-320
GAINESVILLE, FL 32653 US

New Mailing Address:

5513 NW 52 AVENUE
GAINESVILLE, FL 32653 US

FEI Number: 59-2778407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURRY, SCOTT A.
3201 FLAGLER AVENUE
#504-505
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VSTD () Delete
Name: CURRY, C. MICHAEL,
Address: 5513 NW 52 AVE
City-St-Zip: GAINESVILLE, FL 32653

Title: C/D () Delete
Name: CURRY, CHARLES,
Address: 3450 EAGLE AVENUE
City-St-Zip: KEY WEST, FL

Title: P/D () Delete
Name: BAILIE, JOHN C
Address: 21011 LAKEVIEW CIRCLE
City-St-Zip: CORNELIUS, NC 28031

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C. MICHAEL CURRY

VSTD

07/08/2004

Electronic Signature of Signing Officer or Director

Date