FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995 5-11-95 B-66946 C

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

APPROVED AND FILED

95 MAY 11 AM 10:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K47058** **(8)**

1. Corporate Name

KEY CORPORATE SERVICES, INC.

Principal Place of Business	Mailing Address
200 S BISCAYNE BLVD 20 FLOOR MIAMI FL 33131 US	200 S BISCAYNE BLVD TWENTIETH FLOOR MIAMI FL 33131 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **11/22/1988**

3a. Date of Last Report: **04/29/1994**

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. # or Bldg. — 22

Suite, Apt. # or Bldg. — 27

City & State — 23

City & State — 28

24 — 25 — 29 — 30

4. FEI Number: **65-0171804** ☐ 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

9. Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

LEWIS, EDGAR
FIRST UNION FINANCIAL CENTER
200 S BISCAYNE BLVD 20 FLOOR
MIAMI FL 33131

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 Section 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS	
Title	D	Title	☐ Change ☐ Addition
Name	LEWIS, EDGAR	Name	
Street Address	200 S BISCAYNE BLVD 20 FLOOR	Street Address	
City-State-Zip	MIAMI FL	City-State-Zip	
Title	D	Title	☐ Change ☐ Addition
Name	COHEN, ROBERT A.	Name	
Street Address	200 S BISCAYNE BLVD 20 FLOOR	Street Address	
City-State-Zip	MIAMI FL	City-State-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-State-Zip		City-State-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-State-Zip		City-State-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-State-Zip		City-State-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-State-Zip		City-State-Zip	

14. I/We hereby certify that the information supplied with this filing is, to the best of my knowledge, 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 with an address, with an asterisk, for that purpose.

SIGNATURE: [signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EDGAR LEWIS

4-27-95 Date

(305) 358-7606 Daytime Phone #

0126878 CP