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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K47058 1. Corporation Name

KEY CORPORATE SERVICES, INC.

Principal Place of Business		Mailing Address			FII DIDIL AFRIJ DIDIL DIBIF D		
200 S BISCAYNE BLYD 20 FLOOR MIAMI FL 33131 US		200 S BISCAYNE BLVD TWENTIETH FLOOR MIAMI FL 33131 US			DO NOT WRITE II 3. Date incorporated or Qualified	N THIS SPACE	
2 Principal Di	ace of Business	2a, Mailing Address			11/22/1988 4. FEI Number	App	plied For
— ·	ace of business	26			65-0171804		t Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.				/ \$8.75 A	
22	,,, 5.5.	27			5. Certifcate of Status Desired	Fee Re	
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Country	'	8. This corporation owes the current		_
24	25	29	30		Personal Property Tax.	☐ Yes	2540
	9. Name and Address of Current	nt Registered Agent			10. Name and Address of New Regi	stered Agent	
4 574	IO FDO40		81	Name			
	IS, EDGAR T. LINION EINANCIAL CENTER		82	Street Addr	ress (P.O. Box Number is Not Acceptable))	
	T UNION FINANCIAL CENTER S BISCAYNE BLVD 20 FLOOR						
	S DISCATINE DEVID 20 FLOOR		83				
MIAN	NI FL 33131		84	City		FL 85 Zip C	Code
ļ		5) // 61		L	to the transfer of the transfe	· —	registered
l office or re	to the provisions of Sections 607.00t egistered agent, or both, in the State m familiar with, and accept the obliga	e of Florida. Such change was au	thorized by	the corporation	oration submits this statement for the pur on's board of directors. I hereby accept th	e appointment as re	gistered
CICNATURE							ļ
SIGNATURE	Signature, typed or printed name of registered age	ant and title if applicable. (NOTE: I	Registered Age	nt signature require	ya witan tamawangy	DATE	
SIGNATURE		ND DIRECTORS	Registered Age	nt signature require	ad when reinstating) ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTO	
				nt signalure require	ya witan tamawangy		PRS IN 12
12.	OFFICERS AF D LEWIS, EDGAR	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME		ya witan tamawangy	ERS AND DIRECTO	
12.	OFFICERS AND LEWIS, EDGAR 200 S BISCAYNE BLVD 20 FL	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREE	T ADDRESS	ya witan tamawangy	ERS AND DIRECTO	
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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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, or or an attachment with an address, with all other like empowered.

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

SIGNATURE:

358-7605