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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # K90612

(8)

LORAL OF KEY WEST, INC.

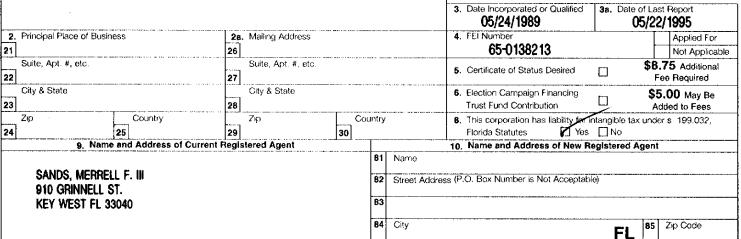
Principal Place of Business

Mailing Address

1448 KENNEDY DRIVE KEY WEST FL 33040

Corporation Name

1448 KENNEDY DRIVE KEY WEST FL 33040



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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

Tamiliar With, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature, typod or printed name of registered againt and title if application (NOTE, Registered Againt signature required when reinstating) DATE							
12.			13.	ADDITIONS/CHANGES TO OF	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	DELFTE	1 1 TITLE	77 Oc. 100 Oc.	☐ Change	Addition	
NAME	ANDERSON, MARCIA		1.2 NAME				
STREET ADDRESS	3608 DUCK AVE.		1 3 STREFT ADDRESS				
City-SI-ZIP	KEY WEST FL		1.4 CHTY - ST - ZIP			·	
TITLE		DELETE	2 1 TITLE		Change	Addition	
NAME			22 NAME				
STREET ADDRESS			23 STREET ADDRESS				
CITY-ST-ZIP			2.4 CITY - ST - ZIP				
TITLE		☐ DELETE	3 1 THTLE		☐ Change	Addition	
NAME			32 NAME			·	
STREET ADDRESS			3.3. STREET ADDRESS				
CITY-ST-ZIP			34 CITY-ST-ZIP				
TITLE		DELETE	4. 1 TITLE		Change	Addition	
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		DEFELE	5 1 TITLE		Change	Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5 4 CITY- ST-ZIP				
TITLE		DELETE	6 1 TITLE		☐ Change	Addition	
NAME:			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6 4 CITY - ST - ZIP				

14. I do hereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 Big. 13 if changed, or of an attachment with an address.

SIGNATURE: MALCH CHARLES OF PROPERTY AND THE SECURING OFFICE OR PROPERTY.

5-14-95 35-292-94-2

CR2E034 (12/95)