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May 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # L37107 (4)

1. Corporation Name
KEY INVESTMENT HOLDINGS CORP.

Principal Place of Business

Mailing Address

1560 GULF BOULEVARD
CLEARWATER FL 34630
US

610 BELLE ISLE AVENUE
BELLEAIR BEACH FL 33786-3614
US



2. Principal Place of Business

2a. Mailing Address

21 1655 E. BAY DR

26 1555 E. BAY DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE H

27 SUITE H

City & State

City & State

23 LARGO, FL

28 LARGO, FL

Zip Country

Zip Country

24 33771 25

29 33771 30

3. Date Incorporated or Qualified
12/19/1989

3a. Date of Last Report
04/27/1996

4. FEI Number
59-2986009

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

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROBERTA DENNIS KAPLAN
610 BELLE ISLE AVENUE
BELLEAIR BEACH FL 34634

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1555 EAST BAY DR

83

SUITE H

84

City

LARGO

FL

85

Zip Code

33771

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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

PDY
COBB, TED
11556 TRADEWINDS BLVD
LARGO FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

VDS
KAPLAN, ROBERTA DENNIS
610 BELLE ISLE AVENUE
BELLEAIR BEACH FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 changed, or on an attachment with an address.

SIGNATURE:

Robert Dennis Kaplan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/97 813-518-9494
DATE Daytime Phone #

0368304

CR2E034 (9/96)