2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State
02-27-2002 90091 001 ***150.00

DOCUMENT # L37853

1. Entity Name
KEY CAPITAL GROUP, INC.

Principal Place of Business	Mailing Address
400 W. 28TH STREET HIALEAH FL 33010	400 W. 28TH STREET HIALEAH FL 33010

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
9500 S Dadeland Blvd	PO Box 561009
Suite, Apt. #, etc.: Suite 603	Suite, Apt. #, etc.:
City & State: Miami FL	City & State: Miami FL
Zip: 33156 Country: US	Zip: 33256-1009 Country: US

4. FEI Number 65-0161733 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LEWIS, JOHN M. 16021 SW 77TH CT MIAMI FL 33157	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P LEWIS, JOHN M. 16021 SW 77TH CT MIAMI FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 16021 SW 77TH CT MIAMI FL 33157
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V LEWIS, LEE M. 7500 S DADELAND BLVD #603 MIAMI FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 9500 S Dadeland Blvd # 603 Miami FL 33156
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S FALK, VICTOR S. 9500 S. DADELAND BLVD. 603 MIAMI FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 9500 S Dadeland Blvd # 603 Miami FL 33156
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V SILVER, JEFFREY A. 9500 S. DADELAND BLVD. 603 MIAMI FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 9500 S Dadeland Blvd # 603 Miami FL 33156
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/01)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John M Lewis 2/14/2002 305-670-7812
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #