

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L86051

FILED
Apr 14, 2004
Secretary of State

Entity Name: KEYSTONE INDUSTRIES, INC.

Current Principal Place of Business:

1211 N. COMMERCE BLVD.
SARASOTA, FL 34243 US

New Principal Place of Business:

746 SAWGRASS BRIDGE ROAD
VENICE, FL 34292 US

Current Mailing Address:

746 SAWGRASS BRIDGE RD.
VENICE, FL 34292 US

New Mailing Address:

FEI Number: 65-0210622 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

XISTRIS, COSTAS D
1211 N. COMMERCE BLVD.
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

XISTRIS, COSTAS D
746 SAWGRASS BRIDGE ROAD
VENICE, FL 34292 US

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: TOULA VENETIA XISTRIS

04/14/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: XISTRIS, COSTAS D.,
Address: 746 SAWGRASS BRIDGE RD.
City-St-Zip: VENICE, FL 34292

Title: D () Delete
Name: XISTRIS, TOULA,
Address: 746 SAWGRASS BRIDGE RD.
City-St-Zip: VENICE, FL 34292

Title: P () Delete
Name: XISTRIS, COSTAS D
Address: 746 SAWGRASS BRIDGE RD.
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOULA VENETIA XISTRIS

VP

04/14/2004

Electronic Signature of Signing Officer or Director

Date